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COUNTY BOROUGH OF SOUTH SHIELDS





ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the year 1967

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PUBLIC HEALTH COMMITTEE

As at December, 1967

THE MAYOR:

ALDERMAN G. GIBSON

Chairman:

COUNCILLOR H. R. DONKIN

Alderman Mrs. L. Glover, J.P.

Alderman Mrs. R. A Hart.

Alderman Mrs. M. E. Sutton, J.P.

Alderman J. E. Wright.

Councillor T. Bell

Councillor M. Diamond

Councillor Mrs. J. L. Fry

Councillor R. Hunter.

Councillor H. K. Malcolm.

Councillor M. A. Martindale.

Councillor Mrs. E. Roberts.

Councillor T. J. Robinson.

Councillor Mrs. L. Smith

Councillor J. Wakeford

STAFF OF HEALTH AND WELFARE DEPARTMENT

As at December, 1967

Medical and Dental Staff:

The Medical Officer of Health, Principal School Medical Officer and Director of Welfare Services

I. D. LEITCH, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health, Deputy Principal School Medical Officer and Deputy Director of Welfare Services

D. F. HENLEY. M.B., B.S., D.P.H. (resigned 8.1.67) ENID M. YOUNG, M.B., B.S., D.P.H. (commenced 1.4.67)

Senior School Medical Officer
H. LEVY, M.B., E.S.

Assistant Medical Officers of Health (and School Medical Officers)

JEAN WALMSLEY, M.B., Ch., B., D.P.H.

LORNA M. ROZNER, M.B., B.S., D.P.H. (resigned 31.8.67)

JANAKI NARAYANAN, M.B., B.S., D.P.H.

Chief Dental Officer and Principal School Dental Officer: T. W. CLARKSON, B.D.S.

Dental Officers:
(and School Dental Officers)

B. SCRAFTON, B.D.S.

MRS. D. M. ELSY, B.D.S. (resigned 30.9.67)

MRS. P. SMART, B.D.S.

J. P. BLUNT, L.D.S.
 (sessional)

Dental Anaesthetist

E. O'NEIL, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M. (sessional)

Consultant Psychiatrist:

(Child Guidance - in conjunction with Sunderland County Borough)

R. N. STANSFIELD, M.R.C.S., L.R.C.P.

Consultant Chest Physician*:
P. M. ROOZE, M.R.C.P., M.R.C.S.

Consultant Adviser in Venereal Diseases*:
COL. B. LEVY, M.D.

Consultant Adviser in Paediatrics*: MARGARET TAYLOR, D.C.H., M.R.C.P.

Consultant Adviser in Mental Subnormality*:

J. S. V. MOUAT, M.B., Ch.B., D.P.M.

Consultant Adviser in Mental Illness*:
N. J. KELLY, M.B., D.C.H., D.A.O., D.P.M.

Nursing and Allied Staff:

Superintendent Health Visitor and School Nurse: MISS E. MYCOCK, S.R.N., S.C.M., S.R.F.N., H.V. (Cert)

Senior Health Visitor:

MRS. M. STEWART, S.R.N., S.C.M., H.V. (Cert)

13 Health Visitors
7 School Nurses
1Assistant Nurse
4 Clinic Assistants

Non-Medical Supervisor of Midwives: MISS J. BARKER, S.R.N., S.C.M., M.T.D.

18 Domiciliary Midwives

Matron Day Nurseries:

MRS. C. ROBSON, N.N.E.B., Cert.

1 Deputy Matron

1 Warden

11 Nursery Nurses

12 Student Nursery Nurses

Matron, South Shields and District Nursing Association:
MISS J. McDONALD, S.R.N., S.C.M., H.V. (Cert)

15 District Nurses and 2 Male Nurses

Social Case Worker

(part-time in conjunction with Northumberland and Tyneside Council of Social Service):

MRS. E. WINCH

Home Help Supervisor:
MRS. A. C. THOMPSON, R.M.N.

*In conjunction with Newcastle Regional Hospital Board.

Other Staff:

Speech Therapist:
MISS G. N. MARTIN
(commenced 4.9. 1967)

Welfare Services:

Chief Social Work Officer: E. F. HEDLEY, A.I.S.W. Senior Social Workers:

H. TAYLOR, A.I.S.W., S.R.N., Q.I.D.N.C.

W. SCOTT, A.I.S.W.

9 Social Work Officers

5 Welfare Assistants

3 Home Teachers

2 Assistant Welfare Officers (Handicraft Instructors)
23 Stewards and Stewardesses of Residential Homes

93 Ancillary Staff

General Administration and Clerical Staff:

Chief Administrative Assistant

J. A. BREWIS, D.M.A.

1 Senior Administrative Assistant

31 Clerks (including School Health Service)

4 Typists

Physiotherapist:

MISS R. HENDERSON (sessional)

Education Psychologist:
(in conjunction with Education Committee)

I. R. McKENZIE, B. Sc (Psych.)

Supervisor of Junior and Adult (Female) Trining Centre:

MRS. I. HOULT

(Dip of Teachers of Mentally Handicapped)

8 Assistant Supervisors

1 Trainee

1 Nurse, S.R.N., Special Care Unit

Supervisor of Adult (Male Training Centre:)

E. POLLARD

3 Assistant Supervisors

1 Trainee

Ambulance Service:

Ambulance Superintendent:

H. BAILEY

Public Health Inspectorate:

Chief Public Health Inspector:

P. V. ROBINSON, M.R.S.H., M.A.P.H.I.

Deputy Chief Public Health Inspector:

J. SMITH, M.A.P.H.I.

2 Senior Public Health Inspectors

3 Inspectors

2 Technical Assistants

3 Pupil Inspectors

2 Rodent Operators

Borough Analyst:

W. GORDON-CAREY, F.R.I.C. (part-time)

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my annual report on the work of the department for 1967.

Once again the birth rate was maintained at a diminished level, 15.7, which, in fact, was the lowest rate ever to be recorded in South Shields and compares with 16.00 for 1966 and a national rate in 1967 of 17.2. Put in another way, the total number of live babies born to South Shields mothers in 1967 was 1,694, 50 fewer than in 1966 and 231 fewer than in 1965.

Of the 1,694 live births, 158 or 9.23% were illegitimate. This represents a 23% increase over the number of illegitimate births recorded in 1966. The indices of loss of infant life for 1967, namely stillbirths, 13.34, perinatal mortality 26.67 and infant mortality 18.22, all showed some decrease over the corresponding figures for the previous year. These reductions are particularly important in the light of a diminishing birth rate and may help to counteract slightly the resulting smaller child population. On the other hand, the causes of infant mortality at all stages now assume even greater significance and all the services concerned must continue to operate as effectively as possible to affect further savings in infant mortality.

The general death rate, without adjustment, for the population as a whole was 10.10, as compared with 11.45 for the previous year. The principle causes of death and their percentages of the total number of deaths were comparable with previous years, although deaths by accident, violence, etc., only accounted for 2.7% of the total as against 4.6% in 1966.

At first glance the tuberculosis figures for 1967 may appear satisfactory and the notification rate of 0.47 as against 0.63 in 1966 suggests that the decline of this disease is being well maintained in South Shields. Normally many of the patients are diagnosed at an early stage but a proportion, particularly in older age groups, are still not ascertained until the disease is at a more advanced form. Such cases are usually more infectious and require more extensive treatment. It is essential, therefore, that the

preventive services such as contact tracing by health visiting staff, mass radiography, B.C.G. vaccination and the tuberculin testing of school entrants should continue to be given adequate public support and co-operation and the policy of this preventive campaign must be regarded as a special priority.

Attendances at the South Shields venereal diseases clinic have shown some increase over the past three years to the extent of 14% and the number of cases of gonorrhoea diagnosed in 1967 (110) is more than twice than in 1965 (43). Although it is impossible to ascertain with certainty the incidence of venereal disease and many factors influence the figures reported from the clinics (such as the number of sessions held), there is possibly a moderate increase, (although not to the levels of the early post-war years,) in these conditions which justifies a continuing preventive effort such as contact tracing and public education. Reference is therefore usually made to the venereal diseases in health education programmes by medical officers and health visitors to secondary school pupils prior to leaving school.

Towards the end of the year a re-organisation of the social work services of the department was initiated and full details of the new policy are set out in pages 101 to 103 of the report. This forward-looking change has brought together all the local authority's social work functions under the National Health Service, Mental Health and National Assistance Acts into one social work unit with an appropriate new staffing structure. The intention is to enable the department to cope more efficiently with the increasing complexity and variety of social problems which are experienced today. The divisions which have been created in the past in the field of social work cannot be easily overcome yet the growth of the social work profession, which now has well established systems of generic training, require some change in organisation to ensure better co-ordination and a service to the public which helps to reduce the number of workers with different statutory responsibilities. These points were uppermost in the implementation of the scheme which has anticipated to a degree, the recently published recommendations of the Seebohm Committee.

The nursing services of the authority have adapted themselves to the changing pattern of need which is so characteristic of these times. The district nursing service has devoted its resources to the increasing problem of elderly patients who account for more than 50% of all patients nursed and ancillary yworkers, both attendants and state enrolled nurses, now play an increasingly important role in this field. The domiciliary midwives have been faced with the challenge of a drastically reduced number of home births and were working in attachment schemes with 18 general practitioners by the end of the year; this arrangement has improved the co-operation and co-ordination in ante-natal care of a large number of patients. Health visitors, whilst speculating on their future role, assume their rightful place as community health advisers to the family but as yet, in this area, working relationships with family doctors have been advanced as far as possible without a full attachment policy. It is anticipated, however, that with the provision of health centres and similar buildings in the next few years, the attachment arrangements for health visitors and other nurses will naturally follow.

There has always been a constant effort to try to improve the premises for local health authority clinics in different parts of the town and when it was appreciated during 1967 that the Ministry of Health would give little financial priority to the provision of local authority clinics in capital investment programmes, attention was directed to consideration of health centre schemes. A meeting of all general practitioners practising in the town had been convened by the Executive Council in October, 1966, to discuss possible future plans for surgery accommodation. The meeting was also attended by local authority officers and a medical officer from the Ministry of Health and a tentative plan for health centres in the town was submitted. This was followed in 1967 by a joint meeting of members of the Health Services Committee and the Executive Council and subsequently there were meetings of general practitioner whose surgeries were located in the various districts of the town concerned. It was clear that there were now favourable possibilities of

examining proposals for health centres. By the end of the year, three schemes were discernible as feasible both to the local authority and to the family doctors concerned. Although financial restrictions have compelled the schemes to be phased in some order of priority, it is hoped that at least one scheme will be commenced within the next two years.

Staff changes during the year included the resignations of Dr. L. Bozner in August after eight years of excellent service to the authority and of Mrs. D. M. Elsy who had taken up duties as a dental officer in the previous year. Dr. Enid Young commenced her duties as deputy medical officer of health in April in place of Dr. D. F. Henley who had resigned in January.

Once more it is my pleasure to acknowledge the valuable support of the Committee and of many other organisations and individuals, without whose assistance the work of the department would be less effective than it is.

I wish to thank also the many members of the staff of the department for their excellent work throughout the year and particularly Dr. Young and Mr. Brewis for their valuable assistance in compiling this report.

I. D. LEITCH,
Medical Officer of Health.

Health and Welfare Department, Stanhope Parade, South Shields.

COUNTY BOROUGH OF SOUTH SHIELDS

Part I

General Data and Vital Statistics

Area and Population

Vital Statistics

Natural, Social and Economic Conditions

Births

Deaths

Mothers and Infants

Area and Population.

Area of Borough	acres
Population:	
Estimated June 1967	109,533 107,760 22.1 36,970 294,080 113,285
Vital Statistics.	
Live Births (corrected) Number	1,694 15.78 9.28%
Stillbirths: Number Rate per 1,000 total live and stillbirths Total live and stillbirths Infant Deaths (deaths under one year)	23. 13.34 1,717 31
Infant Mortality Rates: Total infant deaths per 1,000 total live births Legitimate infant deaths per 1,000 legitimate	18.22
live births Illegitimate infant deaths per 1,000 illegitimate	16.27
Neo-natal mortality rate (deaths under four weeks	37.97
per 1,000 total live births) Early neo-natal mortality rate (deaths under one	14.76
week per 1,000 total live births) Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total	13.57
live and stillbirths)	26.67
Number of deaths	•

ANNUAL REPORT

Natural, Social and Economic Conditions

Meteorology.

There was very little change in the weather during 1967 as compared with 1966, the maximum average temperature being 54.6 degrees fahrenheit and the total rainfall being 24.68 inches for the year. The months of March and April were particularly dry. Full details are given in Table 7 on page 18.

Water Supply.

Details of the town's water supply are included in the Chief Public Health Inspector's report, see page 72.

Industries and Unemployment.

The principal industries in the Borough are shipbuilding, ship repairing, coal mining and export. Light industries (electrical) and engineering fittings, tailoring gown, etc., have now been established for some years and these provide employment for many women.

I am indebted to the Manager of the Employment Exchange, Mr. J. Gillespie, for the following information relating to unemployment:

The average numbers on the live registers taken from the monthly returns were as follows:

		1963	1964	1965	1966	1967
Men (age 18 - 64) Boys (age 15 - 17) Women (age 18 - 24). Girls (age 15 - 17).	6 0 0 0 0 3	2,267 148 444 104	92			1,949 100 309 52
		2,963	2,165	1,527	1,599	2,410

The maximum number of registered unemployed persons during 1967 was as follows:

3 2			0 220
Men.	₽ @	Ø Ø	2,338
Boys.	₩ ⊕	& C	111
Women	0 0	ø &	309
Girls	& \$ 0	0 0	63
			2,821
			Lag Was L

The minimum number of registered unemployed persons was in July, 1967, the figures being:

Men			1,734
Boys.	a •		75
Women	4 4	e e	279
Girls	• •	8 0	24
			2,112

Unemployment continued to rise in 1967 until November then a decrease was shown for that month only.

Births.

There were 1,694 live births during the year, comprising 846 males and 848 females. The crude birth rate per thousand population was therefore 15.7, which is the lowest figure ever recorded in South Shields. Birth rate for 1966 was 16.0 per thousand population. The area Comparability Factor was 0.98, giving an adjusted birth rate for 1967 of 15.46 per thousand population. The birth rate was once again lower than the rate for the whole of England and Wales which in 1967 was 17.2 per thousand population. The decline in both the local and national birth rate continued.

Stillbirths.

The number of stillbirths recorded was 23 (8 males and 15 females) representing a stillbirth rate of 13.34 per total live and stillbriths. The corresponding figure for 1966 was 16.34. The stillbirth rate for England and Wales was 14.8 per thousand total births.

The two major causes of stillbirths in 1967 were foetal anoxia and congenital abnormalities. A predisposing factor in some of the former group was the presence of pre-eclamptic toxemia during the pregnancy, which would be potentially avoidable, and illustrates the importance of early ante-natal care. There remains, however, a large group which are unavoidable.

Illegitimate Births.

There were 158 (82 male and 76 female) illegitimate live births, this being 9.28% of the total live births. It is interesting to note that whilst the illegitimate live births made up 9.28% of the total live births, there were three illegitimate stillbirths, representing 13% of the total still births in the town. The stillbirth rate for illegitimate births is therefore 19.0 per thousand total illegitimate births.

While this local increase in illegitimate births has continued, this is only a reflection of the national trend. It is heartening to record the decrease in the illegitimate stillbirth rate.

Excess of Births over Deaths.

The natural increase of population was 602 compared with 491 in 1967 and an average of 695 for the past decade.

Deaths.

There were 1,092 deaths (596 male and 496 female) registered during the year among South Shields residents. This represents a crude death rate of 10.10 compared with the rate of 11.46 per thousand population for 1966.

The comparability Factor for South Shields is 1.17 and this gives an adjusted death rate of 11.82 per thousand population.

Table 1, page 10 compares the 1967 birth and death rates for South Shields with the national rates and those of neighbouring authorities.

Causes of Death.

The principal causes of death are given in the following table:-

Cause	Number of Deaths 1967	% 1967	% 1966
Diseases of the heart and circulatory system	551	50.4	51.9
Cancer (including Leukaemia)	245	22.4	19.6
Respiratory diseases (excluding Tuberculosis)	133	12. 2	11.7
Accidents, suicides and violence.	30	2.7	4.6

The detailed breakdown of deaths by age, sex and cause is given in Table 2 on page 11.

Deaths from Diseases of the Heart and Circulatory System:

This group remains by far the most common cause of death in the community, accounting for just over half of the total deaths in the Borough. Of this number, 218 (39.5%) were due to coronary disease and angina. The continuing increase in the number of deaths from coronary disease must give rise to grave concern. In South Shields 67 of the deaths from this cause occurred in men and women aged 35 to 65.

Vascular lesions of the nervous system, more commonly known as strokes, accounted for 139 deaths (52 male and 87 female) this being 12.7% of the total deaths.

Deaths from Cancer.

There were 245 deaths (149 male and 96 female) from all forms of cancer during 1967 compared with 246 in 1966. This accounted for 22,4% of the total deaths in the town, giving a cancer death rate of 2.27 per thousand population. As in previous years, cancer of the lung accounted for the highest number of deaths, followed by cancer of the stomach and cancer of the breast.

There were 79 deaths (69 male and 10 female) from lung cancer and of these 41 occurred in men below the age of 65. Health education programmes are continuously directed towards reducing the amount of smoking in the community and particularly towards the younger age groups to discourage

them from starting smoking habits.

Respiratory Diseases.

Deaths from diseases of the respiratory tract, excluding tuberculosis and lung cancer, totalled 133 (86 males and 47 females). Of these, 79 were due to bronchitis and it can safely be assumed that a large proportion of these persons were sufferers from chronic bronchitis.

Accidents, Suicides and Violence.

The total deaths in this group was 40. Of these 9 deaths were due to suicide and further details of these are given in the report of the Mental Health Services on page 47. Of the remaining 31 deaths, 10 were due to motor vehicle accidents and 21 were due to a variety of other accidents, the percentage of deaths due to road accidents remained at 25% in 1967.

A major proportion of publicity is given to road accidents but other accidents, especially those in the home, although less spectacular and rarely fatal, remain a major hazard to health especially in the young and the old. In 1967 an accident register was kept of all children aged 0 - 15 years who required hospital care as a result of accidents and the following accidents were reported from this register:-

Head Injur Poisoning	ies.	ts, ho	usehold	blea	ches	etc.)	101
Falls	ə •		9 0	9 4		0 6	26
Scalding	• •		• •	9 0	• •	• •	3
Dog Bite		0 0		• •	0.9	g - G-	1
Eye Injury		9 0	0 0				
							189

Infant Mortality.

The number of deaths of children under one year of age was 31 (16 male and 15 female) representing an infant mortality rate of 18.22 per thousand live births, compared with 18.0 for England and Wales. The infant mortality rate in South Shields in 1966 was 23.51. Six of the infant deaths in 1967 were illegitimate births.

Neo-natal Mortality.

The number of deaths among live born infants under four weeks of age was 25, giving a neo-natal mortality rate of 14.69 compared with 13.19 in 1966. Of these, 23 deaths were in the first week of life, this period therefore accounting for 74.2% of all deaths under the age of one year.

Perinatal Mortality.

This term refers to stillbirths, plus deaths of infants under one week of age and since it is often a matter of pure chance whether an infant dies before birth or immediately afterwards, this figure gives an accurate indication of infant loss before and during the birth process. The perinatal mortality rate for South Shields in 1967 was 26.07 per thousand total births compared with a national rate of 27. In 1966 the South Shields perinatal mortality rate was 27.07 and the continued downward trend is encouraging. Details of stillbirths and infant deaths for the past ten years are given in the following table.

	Number of Stillbirths	Deaths of infants during first week of life	Perinatal mortality rates	Deaths of infants between one week and twelve months
1959 1950 1961 1962 1963 1965 1966 1967	35554443293	33 28 29 32 29 20 29 25 19 23	.33.8 37.4 38.9 38.8 36.4 30.3 36.5 29.1 27.1 26.7	16 24 12 20 16 13 15 16 22 8

Causes of Infant Mortality.

The principal causes of deaths of infants under one year are set out in Table 3 on page 14. The largest factor was congenital malformations, followed closely by

immaturity and neo-natal asphyxia.

Maternal Mortality.

In 1967 there were no deaths from causes associated with childbirth.

Coroner's Inquests.

I am indebted to the coroner, Mr. A. Henderson, for the following information. Some 204 deaths were notified to the Coroner's Office during 1967. Inquests were held on 53 of these and 157 post mortem examinations were carried out. Inquests were held for the following reasons:-

Accidental				of	accident	s at			
home, wor	k or o	n ro	ads	ø n	* 8	0 9	9	•	21
Suicide .			9 9	9 0	G 59	e .	0		13
Misadventur		9		• 9	0 0	6 6	Ф	•	4
Natural Cau		a		6 9	a 9	3 6	0	*	5
Industrial		68		9 8		o •	2	*	3
Miscellaneo	us .			6 9	9 0	8 5	ð	9	1

Cremations.

During 1967, 793 cremations were carried out at the Corporation Crematorium as follows:

South Shi	elds	resider	its	543
Jarrow.	0.0	• •		110
Hebburn		6 0	• 8	78 26
Boldon	e 6	9 0	0 9	20 36
Others	0 0	☼ \$0		30
		TO	TAL	793

In addition 8 South Shields residents were cremated at Sunderland Crematorium and 3 at Newcastle Crematorium. The total, therefore, of South Shields residents cremated after death in 1967 was 554 which is equivalent to 50.7% of the total deaths. The corresponding proportion for 1966 was 49.1%

Deaths in Hospital and Other Institutions.

There were 564 deaths, (51.6%) of South Shields residents in hospitals or other institutions. Further details are given in Table 4 on page 15.5

TABLE 1

COMPARATIVE VITAL STATISTICS

·		Birt	Earth Rate	Death	Death Rate	Still- Birth	Infant	Neonatal	Peri-natal	Illegitimate Live Birth
Authority	o o o o o o o o o o o o o o o o o o o	Crude	Crude Adjusted	Crude	Adjusted	THE CO		NEW CRITCY	POLEGIA UY	Rate
England and Wales	48, 390, 800	11	17.2	Same of Same o	1.2	14.8	18,3	12.5	25.4	¢
South Shields C. B.	107,760 15.78	15.78	15,46	10.10	11,82	13,34	18.22	14,69.	26.67	9.28
Cateshead C.B.	100,780 17.06	17.06	16.55	11.53	13, 14	18,82	25.00	17.44	33,65	8.00
Newcastle C.B.	251,650 15,37	15, 37	15.37	11.96	13.03	18, 23	24,05	16.03	30.72	12.00
Tynemouth C.B.	72,440	17.20	16.85	11.16	12. 16	12.68	22.49	18.49	27.31	8.03
Sunderland C.B.	219,270	18.51	17.21	10.85	13.02	20.02	23.24	16.34	33, 53	7.69
Durhem County	936, 480 16.98	16.98	16.81	10.88	12.85	15,50	20.70	14.00	26.60	ۍ. ش
Northumberland County	504, 200 14.76	14.76	14,76	11.63	11.79	13.90	17.61	12, 50	24. 12	6.00

* Average population for statistical calculations 211,510

CAUSES OF DEATH by Age and Sex 1967 (as supplied by the Registrar-General)

TABLE 2

piratory			ŝ	10 10 10		4 weeks		6		Age	Years	105			72
Tuberculosis, Respiratory		3		A	week			e du		E CO	35		55-		OVOL
Syphilitic Disease	570	The country of the Co		5	English of the production of t				ę		ŧ	1	6	gen	8
Syphilitic Disease	d.			\$ C	1			et constitution				SP/DHESS/	fr	ŧ	900
Other Infective and Parasitic Diseases Ralignant Nooplasm, Stomach Ralignant Nooplasm, Excast Ralignant Nooplasm, Excast Ralignant Nooplasm, Excast Ralignant Nooplasm, Excast Ralignant Nooplasm, Werus Ralignant Nooplasm, Werus Ralignant Stomach Ralignant Nooplasm, Ralignant and Lymphatic Neoplasms Ralignant Nooplasm, Steams Ralignant Nooplasm, System Ralignant System Ralignant System Ralignant System Ralignant System Ralignant States System Ralignant System Ralignant States System			ical	3	ĝ.	***************************************	9	E E	i i	9	§	Ē.	mel.	Ġ.	mi,
Other Infective and Parasitic Diseases F. 16 Malignant Neoplasm, Jung, Bronchus F. 16 Malignant Neoplasm, Dreat F. 16 Malignant Neoplasm, Dreat F. 16 Malignant Neoplasm, Dreat F. 16 Malignant Neoplasm, Aleukacmia F. 17 Malignant Neoplasm, Aleukacmia F. 18 Malignant Neoplasm, Malignant Neoplasm, Aleukacmia F. 18 Malignant Neoplasm, Malignant Neoplasm, Malignant Neoplasm, Aleukacmia	65	Synthe Lineage oooses ooses on the constant			5	ĝ	8	i i	9	g g	A Principal Control	†	-		0
Malignant Neoplasm, Stomach			Line	6		2	5	9	answer 1	ę	i i	ji ji	f .	\$	•
Malignant Neoplasm, Lung, Bronchus. Malignant Neoplasm, Lung, Bronchus. Malignant Neoplasm, Ereast. Malignant Neoplasm, Ereast. Malignant Events. Malignant System. Malignant System. Malignant System. Malignant System. Malignant System. Malignant System. Malignant Property Disease, Angina.	ø.	Infective and Parasitic Diseases		gond	07%	ń.	1	8	9	Ş	Same?		*	4	£
Malignant Neoplasm, Stomach					80	ŝ	É	1	þ	1	2	9	9		ŧ.
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TABLE 2 - continued

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Bronchitis	23.	Pheumonia	ž	24	1	1	\$	\$	1	ı	8	1	4	Ŋ	15
Bronchitis			[Zid	7	1	₽		e		1		2	γ=t	es	14
Other Discases of Respiratory System	24	Bronchitis	M	26	9	8	1	1	1	ı	1	4	10	23	19
Other Discases of Respiratory System			لتر	63	3	-	,1	(i	1	1	ě	,	4	10	~
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Ulcer of Stomach and Duodenum M. 10 1 3 3				m	ł	48	1	9	ŧ	1	•	1	က		ě
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TABLE 2 -continued

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DEATHS DURING 1967 OF INFANTS UNDER ONE YEAR 63 TABLE

Deaths during 1967 in Institutions and Transferable Deaths

	A STATE	ths in utions in Borough	Shields not Scuth	e in the second	rerable
	Tericents	Non- Residents	Borough	Tesioents	Resident
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TABLE 5 POPULATION, BIRTHS AND DEATHS

For South Shields during 1967 and Previous Years.

	Ages	Rate	10.12.03
S	At All	Number	23 20 20 20 20 20 20 20 20 20 20 20 20 20
DEATHS	l Year ge	Rate per 1,000 net Births	00000000000000000000000000000000000000
	Under of a	Number	4 50 4 70 4 60 4 40 60 60 60 60 60 60 60 60 60 60 60 60 60
BIRTHS		(L)	
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	Population Estimated Widdie of	Fach Year	108,600 108,700 109,300 109,080 108,770 108,110
	# 55 E)		64 94 64 64 64 64 64 64 64 64 64 64 64 64 64

TABLE 6

COUNTY BOROUGH OF SOUTH SHIELDS - VITAL STATISTICS, 1871 - 1967

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	Scarlet Fever	77070000
	Measles	
	Perinatal Mortality Rate	お下さら4ののののののだだ
	Infant Mortality Rate	
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TABLE 7

SUMMARY OF METEOROLOGICAL OBSERVATIONS, 1967 taken at 9 a.m. (G.M.T.) daily at the Bents Park and Health and Welfare Department, South Shields.

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i.	ysib	inuit svidalett	83.8	75.4	65.3	73.2	78.8	72.0	69.7	75.3	85.6	78.8	A5.9	70.9	76.9	1
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		Date	9		<u></u>		CD 000		28	200	447 0-4	200	CA	CC :	1	a de la composition della comp
٥	Absolute	muniriM	6° 86	31.4	30.8	28.6	31.8	43.6	47.6	48.0	45.2	35.1	30,6	25.4		
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Air	ब द्व	man in il	35.7	38.9	4n.5	42.6	43.7	52.0	5.4.7	53.7	51.2	45.8	37.1	36.4	44.4	
	Аустаде	mum ix 1/2		47.3	51.4	51.6	54.8	62.5	6.99	65.8	61.3	56.9	47.8	45.5	54.6	,
		Narometer (co	li a	29.848	30, 777	29.993	29.852	30, 122	28 665	29.877	29.774	20,557	20,828	30, 228	29.86P	,
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Part II

SERVICES UNDER THE NATIONAL HEALTH SERVICE ACT

1946

Care of Mothers and Young Children.

Midwifery.

Health Visiting.

Vaccination and Immunisation.

Ambulance Service.

Prevention of Illness., Care and After-Care.

Home Help Service.

Mental Realth Services.

CARE OF MOTHERS AND YOUNG CHILDREN

Vital Statistics.

A summary of statistics for mothers and infants is set out on page 2 of this report.

Ante-Natal Clinics.

During 1967, ante-natal sessions continued to be held at the Stanhope Parade Clinic, Steward Crescent Community Hall and Boldon Lane Clinic. One evening session was held each week for the benefit of mothers who were working or had large families or who for other reasons found it easier to attend in the evening.

ATTENDANCES AT ANTE-NATAL AND POST-NATAL CLINICS

Year	Numb Sess durin		wome: atte	er of n who nded year	new atte	er of cases mded year	atten	tal dances year
	Ante- natal	Post- natal	Ante- natal	Post- natal		Post- natal	Ante- natal	Post- natal
1962	320	45	2,206	104	1,756	104	8,849	144
1963	308	43	2,097	56	1,697	54	8,741	160
1964	315	22	2,030	44	1,607	44	8,287	45
1965	258		1,814	42	1,471	42	8,082	42
1966	266	-	1,941	-	1,393	-	7,792	-
1967	203	-	869	-	1,398		8,430	-

Post-Natal Examinations.

No specific sessions are allocated to Post-Natal Clinics but patients who require post natal examinations by the local authority staff are offered appointments at other clinic sessions.

Child Health Clinics.

Child health clinic sessions were held each week in

various parts of the town, as follows:

Stanhope Parade Clinic	3
Steward Crescent Community Hall	2
Baring Street Church Hall	2
St. Margaret's Church Hall	2
Galsworthy Road Church Hall	1
Wenlock Road Community Hall	1
Boldon Lane Clinic	2

Once again, it proved necessary to close Galsworthy Road Clinic from December, 1966 until April, 1967 but during the year, the heating arrangements were investigated and improved and it is expected that no further closures will be necessary.

During the past year, the maternity and child health clinics have followed the trend outlined in the 1966 Annual Report. There has been no change in the vaccination and immunisation programme.

The periodic medical examination of well children, as well as those at risk of developing handicaps and the physical condition of the children attending, was gratifying.

The child health clinic provides a valuable advisory service. Many mothers, particularly the inexperienced, have worries about their children and yet are reluctant to consult their general practitioners in case they would be wasting his time. The staff of the child health clinics have time to listen, either allaying the mothers' fears or give advice on any further action which should be taken.

ATTENDANCES OF CHILDREN AT CHILD HEALTH CENTRES DURING 1967

Control of the second s	No. of Sessions Held	No. of Children attended in Year	No. of (Born in 1967	hildren A Born in 1966	0	Total Attendances
The Contract of the Contract o	621	4,536	1,257	1,318	1,961	21,626

Distribution of Welfare Foods.

Welfare Food, i.e. National Dried Milk and vitamin preparations for expectant and nursing mothers and children under five continued to be distributed daily at the Stanhope Parade Clinic and at all child health clinic sessions in other parts of the town. Two brands of proprietary dried milk were also made available for sale through the Welfare Foods Service. Details of the sales of these various items are set out in the following table:-

Year	National Dried Milk (tins)	Cod Liver Oil (bottles)	Vitamin A & D Tablets (packets)	Orange Juice (bottles)	Virol (cartons)	Proprietary Brand Dried Wilk (packets)	Rose Hip Syrup (bottles)
1963 1964	67, 439 58, 573	2, 102 1,725	1, 443 1, 117	17,461 16,496	1, 303 1, 056		
1965 1966 1967	52,615 37,244 28,706	1,615 1,518 1,540	790 755 875	18,569 19,329 18,461	1,537 1,398 1,501	20,271 27,264 27,438	12,866 17,503 14,760

Routine Medical Examination of Pre-School Children

Arrangements whereby parents are invited to bring their children between four and five years of age for a routine examination at child health clinics of their choice were continued, until the end of June, 1967. Because of the shortage of medical staff it was found necessary to adjust the various programmes and for the time being the medical examination of children between the age of four and five years has been suspended. It is hoped that in the near future we may obtain our full complement of medical staff when we can then re-introduce this service which is so popular amongst parents.

Year	No. of Children Offered Examination	No. of children Examined (%)	No. Referred to General Practitioners and Hospitals
1963	1,440	1,039 (72.1)	29
1964	1,550	1,078 (69.6)	131
1965	1,694	904 (52.9)	176
1966	1,660	1,071 (64.5)	125
*1967	954	676 (70.9)	151

[&]quot; Up to 30th June, 1967 only.

Priority Dental Service for Nursing and Expectant Mothers and Children under School Age.

The dental service for expectant and nursing mothers and children under five years continued to function reasonably well during the year.

The great difficulty is in the referral of patients particularly the pre-school child. This would appear to be due to lack of national publicity on the availability of this service. A great deal of reluctance to obtain early and conservative treatment of the baby teeth is still only too obvious.

It is hoped with further dental health education programmes that this can be remedied.

A. Numbers provided with Dental Care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	86	79	73	73
	523	332	332	222

B. Forms of Dental Treatment provided.

	Scaling and Gum Treatment			Der Full	
Expectant and Nursing Mothers	2	87	161	10	19
Children Under 5	7	477	728	40	

Phenylketonuria.

Health Visitors continued to test urine of all infants at the second and sixth week of life for phenylketonuria. No positive result has yet been recorded in the town.

Congenital Abnormalities.

The scheme for notification of all congenital

abnormalities apparent at birth continued throughout 1967, the information is collected in the Health and Welfare Department and transmitted to the General Register Office. During 1967, there were 20 live and 2 stillborn infants notified as having congenital abnormalities, giving an incidence of 12.7 per thousand total births. Abnormalities notified in these 22 infants totalled 26, an incidence of 15.0 abnormalities per thousand total births. Further details are given in the accompanying table.

Abnormalities	Number	Rate per 1,000 total births
Central nervous system Eye, ear	9 2 5 1 1 5 3	5.2 1.1 2.9 0.5 0.5 2.9 1.7
Total	26	15.0

Children "At Risk"

The register of children notified to the department as being "at risk" and likely to develop some form of handicap later in life was continued. During the year a total of 547 cases were notified and added to the register.

All the children on the above register who had attained the age of nine month's were offered a hearing test by the health visiting staff. A summary of the test carried out in 1967 is given below:

Total number	of	tests				 643
No. of re-tes	sts.					 35
Referred for	fui	ther	inve	estigati	Oli	 12

Day Nurseries.

The following is a statement of the work of the two day nurseries for the past year at nos. 1 and 29 Beach Road. There is accommodation for 40 children in each nursery.

	No. 1 Beach Road	No. 29 Beach Road
Number of children on register at end of 1966	44	46
Under 2 years old	26 43	16 23
Number of attendances during 1967: Under 2 years old	2,392 6,585	2,000 5,805
Average attendance per session: Under 2 years old	9.4 26.0	7.9 22.9
Number of children on register at end of 1967: Under 2 years old:	8 32	14 36

The arrangements for the admission of up to six children, who had either handicap or social problems, at a special concessionary charge was continued. As mentioned in my 1966 report the Committee had agreed to a phased policy of additional appointments of nursery nurses to meet the staffing ratio suggested by the Ministry of Health's Circular in 1965. A further two nursery nurses were appointed in 1967.

The day nurseries are authorised as a training school for the Nursery Nurses Certificate and during 1967, 5 student nursery nurses were successful in obtaining their certificates. The interchange of students between the nursery school class at Harton Infants School and the day nursery was again arranged. During the year the nurseries were visited by a number of outside groups and organisations.

A minor outbreak of sonni dysentery occurred in February, 1967, and the admission to the nurseries were suspended until the beginning of April.

In June, 1967, a system of "family grouping" was introduced in one of the day nurseries. Instead of the children in the nursery being divided into three nursery groups, namely babies, tweenies and toddlers, they were divided into small groups containing all ages as in a normal family. This experiment proved so advantageous to both children and staff that in July it was extended to both nurseries.

Nurseries and Child Minders Regulation Act, 1948,

There were three applications for registration as child minders under the above Act. These were granted, subject to certain conditions. The two premises registered as nurseries in the town were visited during the year and found to be satisfactory.

Total No. of Persons and Premises Registered Under the Act at 31st December, 1967:-

Child	Nursery
Minders	Premises
6	2

Care of the Unmarried Mother and Her Child.

The scheme for the care of illegitimate children and unmarried mothers is carried out jointly by the Council and the Jarrow Deanery Moral Welfare Association. A full-time welfare worker is employed by the association and has an office in South Shields, though her duties cover the areas of neighbouring authorities. The South Shields Council make a grant of £560 per year towards the cost of this service and also make a contribution towards the maintenance costs of patients admitted to mother and baby homes. During 1967, 27 unmarried girls belonging to South Shields were admitted to these homes, at a cost to the Council of £655. The following is a summary of the work done by the welfare worker in South Shields during 1967:

	19	966	1967
No. of married wo No. of divorced w No. of putative f No. of other case No. of South Shie	8,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	54 10 2 2 -4 28 1	61 17 4 17 11 21

Family Planning Association.

The event of the year in the Family Planning calendar was the passing of the National Health Service (Family Planning) Act, 1967, in June. This Act extended the existing powers of local health authorities to enable them to provide either directly or through other organisations advice on contraception and supplies of contraceptive substances and appliances for any persons who need them on social grounds as well as for medical reasons and to recover such charges as appear reasonable, having regard to the means of the recipient.

Family planning advice and prescriptions may, of course, be obtained from general medical practitioners.

Prior to this Act, there had been a Ministry of Health Circular urging local authorities to review their arrangements for family planning, which was fully reported in my 1966 Report. In accordance with this circular, the Family Planning Association were invited to hold weekly sessions in Stanhope Parade Clinic. These sessions commenced in February, 1967 and are held on Wednesday mornings.

The Council continued to accept financial responsibility for women referred on medical grounds from local authority clinics to the Family Planning Association. During 1967, a total of 181 patients were referred at a cost to the Authority of £1,011 12s. Od., a four-fold increase over the previous year. The Council had agreed in principle to make a grant of £200 to the Family Planning Association but in view of the large number of patients referred and the consequent benefit to the Family Planning Association and the increasing cost to the local authority, a meeting was held with representatives of the association and it was agreed that a grant of £100 was reasonable for 1967. This would be subject to review annually.

In October, 1967, an experimental domiciliary service was introduced. A specially trained nurse was employed by the Family Planning Association to visit the homes of those women who were considered in need of family planning but who either would or could not attend the clinic. The Council agreed to pay for this service and if it

should prove successful, it will be established on a permanent basis.

MIDWIFERY SERVICE

Notification of Births:

The number of births notified in the County Borough during 1967 was as follows:-

	Live Births	
Domiciliary births	571 1,114 1,685	34 36
LESS		
Born in South Shields Maternity Hospital to mothers not resident in the town	397 1,288	15 21
ADD		
Born outside South Shields to mothers resident in the town	413	2
NET TOTAL OF BIRTHS TO SOUTH SHIELDS MOTHERS	1,701	23

The Institutions outside the County Borough where * the births occurred were as follows:

	Live Births	Still-Births
Danesfield Maternity Home, Jarrow Princess Mary Maternity Hospital, Newcastle. Sunderland Royal Infirmary Ashleigh Nursing Home, Gosforth Queen Elizabeth Hospital, Gateshead General Hospital, Newcastle Richard Murray Hospital, Consett Hopedene, Newcastle Maternity Hospital, Cambridge Maternity Hospital, Sunderland	363 30 2 1 1 3 2 4 1 6	1
	413	2

Place of Confinement.

Table 8, page 30. gives the place of confinement of South Shields births over the last ten years. The

proportion of births taking place in institutions is increasing and is now 66.6%, though this is still below the national average and suggested rate of 70%. Over 31% of these births, of course, take place in Danesfield Maternity Home which is a general practitioner unit and does not have all the facilities of a maternity hospital. It is, therefore, not suitable for cases considered to be in high risk groups.

Care of Premature Infants.

During 1967, there were 66 live births of infants weighing 5%lbs. or less at birth. Further details of these are given in Table 9, on page 31. Of the 23 still-births, 12 were premature, all of which were born in hospital.

Intention to Practise.

Notifications of intention to practise were received from 51 midwives during 1967 and of these 28 were in the maternity hospital and 23 in practice as domiciliary midwives.

TABLE 8

PLACE OF CONFINEMENT (SOUTH SHIELDS COUNTY BOROUGH)

	** *** *** *** *** *** *** *** *** ***	
	Percentage of Births in Hospitals	0.044440000000000000000000000000000000
	Still- birth Rate	18 24.22 23.58 10.30 16.33 16.34 16.34
	dotal	& \cdot \cd
STILLBIRTHS	Other Hospitals	4v00000000
STIL	South Shields Maternity Hospital	26 (13) 46 (13) 35 (13) 30 (19) 35 (28) 19 (15) 19 (15)
	Home	80000000000000000000000000000000000000
	Total	22,065 1,000 1,000 1,744 1,002 1,002 1,002 1,002 1,002 1,002 1,002 1,002 1,002 1,003
LIVE BIRTHS	Other Institutions	325 310 2255 304 4457 401 401
NET L	South Shields Maternity Hospital	423 (180) 555 (244) 580 (248) 629 (314) 710 (334) 720 (384) 717 (392)
	Ноше	1111 1011 1011 1011 1011 1011 1011 101
	YEAR	119659 19669 19669 19665 19665 19665

The figures in parenthesis refer to births occurring in the Maternity Hospital to mothers who are not resident in South Shields.

TABLE 9
PREMATURE BIRTHS

				Q.	PREMATURE LIVE BIRTHS	HE LIV	E BIRT	S						
						Born	Born at home or		in a nursing home	ng home			Prem	Premature
		born in Rospical	spiral		Nur home or	pa. E.	Nursed entirely at or in a nursing home	ome	Trans	ferred r befor	Transferred to hospital on or before 28th day	pitel day	81111	stillbirths
			-				pai				Died		Born	L.
	S Total Bircha	erd 24 hirs & hre dirid 10	rabnu bas I ni &	Ein 7 and under 28days	edrill letol &	Swithin 24 hrs of birth	Sin I and under	and 7 and wider ⊕ 28 days	S local bircha	within 24 hrs 50 of birth	rebrue bna 1 nig.	Zin 7 and under	Egin hospited.	at home or in Za nursing mone
1. 21b. 30z. or less.	63	6-3	ĝ	8	-	Q	9	ð	ð	ð	ĝ		2	6
Over 21b. 30x, up to and including	10	හා	,								9	•	-	•
20 \$	2	2			2	•	\$		b	· t				
Over 41b, boz. up to and including 41b. 15 oz	gaza		ę		و		c	•		9	8	0	7	,
3. 15 o	25				22	9	8			,		a	- Same	
6. 10kg, 10 cosessos es	99	œ	gwad		25	3	t	•	\$	0			12	
	Section of the Principles	Andreas of the section of the sectio	A STATE OF THE PERSON OF THE P	Seat of the Salar Salar Salar	STREET STREET STREET STREET	SECTION OF THE PROPERTY OF THE PERSON OF THE	CONTRACTOR		A CHARLES AND LOCAL CO.					

3, 1,501-2,000g, 4, 2,001-2,250 g, 5, 2,251-2,500 g. 2. 1,001-1,500g. 1. 1,000 g. or less

Domiciliary Midwifery Service.

The staff of the domiciliary midwifery service at the end of 1967 comprised the Non-Medical Supervisor and 18 full time midwives of whom one was assigned to special baby care.

Midwives attended a total of 573 domiciliary births in 1967, this being 51 fewer than in 1966. In 365 cases, medical aid was sought by midwives under Section 14(1) of the Midwives Act 1951. In addition 1,058 patients were nursed on discharge from hospital before the tenth day. Of these 105 were discharged before the third day and 813 between the fourth and seventh day.

The total number of visits paid was as follows:

Details of Ante-natal clinics under a liaison scheme with general practitioners are given on page 56.

Maternity Outfits.

Complete outfits were distributed to 680 expectant mothers during 1967 and 22 special outfits to mothers discharged early from maternity hospitals.

The Report of the Non-Medical Supervisor of Midwives

practitioner/midwife attachment scheme, which commenced in September, 1966. There can be no doubt that the improved co-operation and communication at a personal level has been an advantage to all concerned. 18 general practitioners from 8 practices are now participating in the scheme - accounting for approximately 40% of the total number of family doctors working in the Porough. 5 practices made

use of local authority premises and 3 practices worked from their own surgeries. The total number of attendances during the year to these clinics was 5,043.

Health education was given to all mothers, irrespective of place of confinement, who wished to attend the weekly mothercraft classes. Throughout the year, 322 expectant mothers attended, the total number of attendances being 1,375.

The Thursday morning cytology clinics conducted by the midwifery staff were terminated in August, as it was found unnecessary to run this clinic in addition to the regular evening session. Domiciliary cytology is still available to any member of the public who cannot attend the local authority clinic. 44 domiciliary visists were paid in 1967 and two hundred special home visits were made on defaulters from the regular cytology clinic.

A member of the midwifery staff attended the special baby care unit at the Maternity Hospital twice weekly and made suitable arrangements for the reception of the babies into their own homes, with follow-up care and advice to the parents.

There has been a slight decrease in the peri-natal mortality rate and we would expect this to continue as the services available to expectant mothers are constantly improving.

Port II Training.

The Part II midwifery training school offers a six months course in domiciliary midwifery. Students also observe the work of other departments concerned in the overall care of the expectant mother and her family. The experience gained gives the student the ability to accept responsibility and offer a good practical and advisory service. Students are resident at Ravenscroft, 26 Grosvenor Road, for the training period.

The following is a summary of the work:

In training	on lst	January,	1967			5
New Student	s during	1967			6 9 9 9 9 9	17
Still in tre	aining o	m 3lst D	ecember.	1967	999098	4

N			stude										
	th	e I	Board'	s ex	camin	nati	on						 . 15
	0.	of	stude	nts	who	pas	sed	exami	inati	on		• • • •	 . 13
No)	of	stude	nts	who	did	not	comp	olete	tra	ini	ng.	 . 2

HEALTH VISITING Report of Superintendent Health Visitor

The staff at the end of the year consisted of the Superintendent, 12 full-time and 1 part-time health visitor; there were 3 vacancies.

The importance of training health visitors is gaining prominence as the present shortage of health visitors is likely to become more acute. One reason for this is the high proportion of practising health visitors throughout the country who are nearing retiring age and the Minister of Health has always encouraged health authorities to recruit student health visitors.

2 student health visitors were appointed and commenced their training course in September, 1967. The Senior Health Visitor continued to act as field work instructor to 2 student health visitors from the course at the College of Commerce, Newcastle upon Tyne. This entailed the training and supervision of the students during their training on the district.

New developments are constantly occurring in the field of health and welfare and to enable the staff to keep up with new ideas and trends, it is usual to arrange for each health visitor to attend a refresher course every 5 years and for in-service training for all the staff throughout the year. During 1967, 3 health visitors attended refresher courses and talks and films were arranged on a variety of subjects, including congenital dislocation of the hip, health education and children at risk.

The health visitor continued to play an active role in the health education programme in senior girls' schools in the Borough and in addition to routine health advising of individuals, which is an essential part of their everyday work, gave talks to Young Wives and Church Mothers' Clubs.

The policy of close working with general practitioners, hospitals and other services was again implemented during the year. This is reported in greater detail on page 56.

There is speculation at present on the eventual role of the health visitor, as she is both medically and socially trained. She is certainly in a rather unique position in the pattern of community care of families. The trend is at the present time for complete attachment with general practitioners and in the foreseeable future, health visitors will be providing a wider family service under the direction of the gneral practitioners, assisted by midwives and district nurses. This will lead to a preventive and curative medical service in which the future role of the health visitor should prove to be not only challenging and exciting but also satisfying.

Details of the work of the health visitors during 1967 are set out below.

	Cases Visited by Health Visitor	No, of Cases
1	Children born in 1967	1,661 1,708
3	Children born in 1966	4,763
4	Total no. of children in lines 3 - 3	8,162
5	Persons aged 65 or over	534
6	Number included in line 5 who were visited at the special request of a G.P. or hospital	108
7	Mentally disordered persons	18
8	Number included in line 7 who were visited at the	
9	special request of a G.P. or hospital Persons, excluding maternity cases, discharged	Ö
7	from hospital (other than mental hospitals)	237
10	Number included in line 9 who were visited at the	
9 4	special request of a G.P. or hospital Number of tuberculous households visited	53
11	Number of tuberculous nouseholds visited on account of other	
10	infectious diseases	199
13	Other cases	632

HOME NURSING SERVICE Report of the Superintendent

This service continues to be carried out on behalf of the Corporation by the South Shields and District Nursing Association.

At the beginning of 1967, the staff of the Association comprised the Superintendent, 12 full-time and 7 part-time nurses and 4 bath attendants.

The nursing care of patients in their own homes is an essential part of any comprehensive health programme and in providing this, the home nursing service renders a valuable service to the community. To ensure a more efficient service, in January 1967 the Borough was divided into four districts with a nursing team in each district, each team having a group leader.

A number of patients requiring the services of a district nurse are not housebound and yet have to wait in their homes for the nurse to call. In order to accommodate these patients, a pilot scheme was commenced during the year, by which they attended clinics at the District Nursing Association headquarters and has proved successful.

Bath attendants provided an ancillary service which saved valuable nursing time and has been much appreciated by the senior citizens in the town.

The service provided by the Marie Curie Memorial Foundation Scheme, in conjunction with the Health and Welfare Department, for those patients suffering from malignant disease was continued. 5 nurses were employed during the year and gave a total of 1,301 hours additional care to 41 patients.

The Superintendent attended three study days on the Changing Scene in District Nursing and one nurse attended a course on "Community Care".

Cases on books 1st January, 1967	438
New Cases:	
MedicalSurgical	
Ear, nose and Throat	

Pneumonia and Pleurisy	
Visits paid by nurses	1,399
Patients still on books at end of December	522

The Association was approved by the Queen's Institute of District Nursing as a Practical Training School. 2 state registered nurses completed their training and were successful in gaining their certificates.

VACCINATION AND IMMUNISATION

During 1967, the general scheme for immunisation and vaccination followed the same pattern as 1966. Details of the schedule followed in the Department is set out in Table 10.

Vaccination Against Smallpox.

The number of vaccinations and re-vaccinations performed during the year are given below.

·	Under 1 Year	l - 4 Years	5 - 15 Years	Total
Primary Vaccination	71 71	535 6 541	29 12 41	635 18 653

The number of children vaccinated in infancy continues to remain small and this is due to vaccination being deferred to the second year of life when attendances at Child Welfare Clinics are less frequent.

The following table shows the number of successful vaccinations and re-vaccinations carried out in the past 5 years.

	1963	1964	1965	1966	1967
Under 1 year (a). (b). 1 - 4 years (a). (b). 5 - 15 years (a). (b).	379 372 31 439 146	81 - 463 6 32 29	38 562 6 27 21	57 621 10 84 49	71 535 6 29 12
Totals (a). (b).	1,190 177	576 35	627 27	762 59	635 18

(a). Primary Vaccination (b). Re-vaccination.

Percentage of children under 5 years protected 34%.

Diphtheria Immunisation.

The number of children immunised against diphtheria during 1967 was 1,603 and a further 2,499 received reinforcing doses. The following table gives further details:

	Child	lren l	Born in	the	Year(s)		
	1967	1966	1965	1964	1960/3	Others Under 16	Total
Primary Doses	558 -	525	772 350	68 597	136 1,316	23 123	1,603 2,499
	558	525	1,122	665	1,452	146	4,102

Of the children aged 1 - 4 years, 71% have completed courses of primary vaccination. Although this is in line with the general level of immunity in the country, there is no reason for complacency and intensive efforts to encourage mothers to accept immunisation for their children should be continued.

Pertussis Immunisation.

Some 1,425 children under 5 years of age were protected against whooping cough, either singly or in combination with other antigens.

Tetanus Immunisation.

Immunisation against tetanus, either singly or in combination with other antigens, was continued for both children under 5 years and children attending school. As in previous years, the policy of ensuring that older school children were given primary courses of protection against tetanus was implemented.

The number of children who received a primary course of immunisation against tetanus was 1,479 under 5 years and 1,938 school children. Reinforcing doses were also given to 1,970 children under 5 years and 2,245 school children.

Vaccination against Polionyelitis.

The following table gives details of the number of persons protected against poliomyelitis during 1967.

	Under 5 Years	5 - 15 Years	
Primary Vaccinations completed 1967 Reinforcing dose	1,499	4	1,503
	679	9	688

It was estimated that by the end of the year, 80% of children under 5 years, and 90% of children aged 5 - 15 years, had received a primary course of poliomyelitis vaccine.

AMBULANCE SERVICE

The following is a statement of the work of the Ambulance Service during 1967:

Patients:

			addresses addresses			51,643 16,960
Tot	al	Patie	nts	 * • • •	***	68,603

Journeys:

Journeys with patients in South Shields	
Accidents and emergencies	2,393
Midwives with analgesia apparatus	
Other journeys	165
	15,571

Mileage:

Mileage Mileage	in South	Shiel South	ds Shield	 0 6 0 c	0 0 0 0 0	* * * * * * * * *	• • • • •	123.351 98,724
								000 075
Costs.							,	222,075

The cost of the service for the year ended 31st March, 1967 was £59,038 which gives a unit cost of 5s. 4d. per vehicle mile. Corresponding figures for the previous year were £55,233 at 4s. 11d. per vehicle mile. In 1967 each journey averaged 14.2 miles and 4.4 patients were carried as compared with 15.3 miles and 3.7 patients in 1966. These figures show a slight decrease in the average mileage with a slight increase in the number of patients carried.

Staff.

At the end of the year the staff comprised a Superintendent, 4 chargehands and 28 driver/attendants, 1 motor mechanic, 1 labourer and 1 night telephone operator.

New Vehicles.

3 new abulances were received into service during the year. One was a Bedford/Martin Walter sitting case vehicle and one was a Bedford/Lomas ambulance with the new K.A. chassis. One of the small Bedford/Lomas sitting case cars was involved in an accident during the year and had to be written off. This was replaced by a purpose built Bedford/Lomas sitting case vehicle.

Emergency Calls.

During 1967, there was a total of 2,393 emergency calls compared with 2,320 calls in 1966.

The arrangements whereby the South Shields Ambulance Service provides emergency cover to the Whitburn and Cleadon areas on behalf of the Durham County Ambulance Service continued during the year.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Recuperative Holidays.

Recuperative holidays in approved convalescent homes are arranged by the department for persons who are recommended by their family doctors for this form of care and who are unable otherwise to obtain such treatment. During 1967, 11 applications - 1 male and 10 females - were made. These requests came from medical practitioners, almoners and health visitors. 9 patients had a holiday as follows:-

In	the	Metcalfe Smith House, Harrogate	1
In	the	Rose Joicey Home, Whitburn	7
In	the	Alne Hall, Near York	1

				Male	Female
Aged 1	6 -	25	years	ÇD)	1
Aged 2	0 -	45	years	99	2
Aged 4	6 -	65	years	1	3
Aged 6	6 -	75	years	qb.	2
				OCCUPATION OF STATE	- MERCAL PROPERTY AND ADDRESS.
				1	8
					MANUFACTURE OF THE PROPERTY OF THE PARTY OF

The gross cost of these holidays to the local authority was £145.

Sick Room Equipment.

During 1967 a total of 949 items of nursing equipment were issued to patients being cared for in their own homes.

Most of the equipment is issued from the Stanhope Parade Clinic, but some items are also available at the Boldon Lane Clinic. The articles provided were as follows:

Bedpans

The arrangements for the issue of incontinence pads to those patients requiring them were continued. These pads are issued by the District Nursing Association on behalf of the department and the vast majority are used by patients who are already receiving home nursing care. In addition to the incontinence pads, protective clothing for incontinent ambulant patients, were also made available for patients in the town.

Approximately 10,000 incontinence pads and protective garments were issued during the year.

Family Casework.

The arrangements whereby the Northumberland and Tyneside Council of Social Service employ a family caseworker, who spends much of her time in South Shields, continued during 1967. A summary of the work done follows:

	1966	1967
Sources of cases referred - Health and Welfare Department. N.S.P.C.C. Ministry of Social Security. Probation Service.	44 6 8 1	35
Other agencies	9	13
Citizens Advice Bureau	-	4

During 1967, 63 new cases were referred. The case load carried over from the previous year was in the region of 55.

While many of the new cases required long term case work, quite a number, mainly financial, were dealt with over a short period of six months. The reason that cases were dealt with so successfully is the referral of cases in the early stages of financial difficulties. This enabled the case worker to deal with cause and effect quickly, thus preventing the ramification of problems that generally tend to arise when families who get into financial difficulties, leave off paying rent, etc., to pay hire purchase debts and end up borrowing and selling to try and release themselves from the vicious circle of financial difficulties in which they find themselves.

The caseworker would like to thank the officers and staff of the Health and Welfare Department for their co-operation received during the year. She would especially like to thank Miss Mycock, Superintendent Health Visitor and the health visitors who, through their close co-operation, have made the caseworker feel she was an integrated member of their department, while retaining her independence as a worker for a voluntary organisation.

Night Attendance Service.

This scheme to provide for the overnight supervision of elderly or ill patients was available throughout 1967. Applications for the service were made to the Superintendent of the South Shields and District Nursing Association, who assessed the needs of each case and allocated help accordingly.

Chiropody.

This service is one of the most appreciated local authority services. In spite of having a full-time chiropodist, it has proved impossible to meet the demand at our clinics and it is hoped that we will be able to obtain the services of another chiropodist in 1968.

The arrangements operated by the Old People's Welfare Committee whereby old people received treatment in their own homes or at the headquarters of the British Red Cross Society were maintained. A grant of £1,100 was given by the Council for this purpose. A Chiropody Service is also provided for the elderly in the residential homes.

A summary of the work carried out over the past 5 years is given in the following table, from which it will be seen that 15% more patients were treated in 1967, as compared with the previous year:

	1963	1964	1965	1966	1967
Total attendances	1,135	1,115	3,397	3,249	5,202
at patients' home Total number of patients	221	267	281	238	235
treated	655	628	1,135	1,635	1,889

Cervical Cytology.

The weekly sessions at Stanhope Parade Clinic continued during the year but in May, 1967, the additional session staffed by the domiciliary midwives was discontinued, due to lack of demand. In addition however, a domiciliary service is available for those who are unable to attend the clinic.

During the year, out of 2,487 women who had requested and been sent appointments, 1,739 attended for this examination; 18 of these were found to have positive or highly suspicious smears, requiring further investigation and 58 to have other minor gynaecological abnormalities. All women who required either further investigation or treatment were referred to their general practitioners.

Fluoridation of Public Water Supplies.

During 1967, further discussions with the Sunderland and South Shields Water Company regarding the technical and financial aspects took place. It is expected that all problems will be resolved and fluoridation of water supplies will take place in 1968.

HEALTH EDUCATION

It is pleasing to note that the keen interest in the health education programme in the girls' senior schools in the town continued in 1967. This programme is reported fully in the School Health Report 1967.

Health Education is an integral part of the work of the the Health and Welfare Department. All departmental staff endeavour to disseminate propaganda in the course of their daily work, and in addition are always willing to give talks on various health topics, such as clean food, dental health and mothercraft. Posters and leaflets are also used in the various clinics and office premises for the information of the general public.

In Service Training.

There is a long established practice in the department of encouraging all members of staff to keep abreast of modern development and new policy in the health and welfare services. A large number of professional journals are purchased and are made available to all members of the staff.

A number of special in service sessions were held for medical and nursing staff covering various aspects of their work, including At Risk Children, Examination of the Newborn and Congenital Dislocation of the Hip.

HOME HELP SERVICE

At the end of 1967, there was one full-time home help working 40 hours weekly and 177 part-time working an average of 20 hours weekly. During the year, 40 home helps resigned and 10 were engaged.

The following table gives the total number of cases who received home help during the year, with the hours worked (figures for previous years are included for comparison):

	1967	1966	1965	1964
No. of households attended. No. of hours worked	1,198	1,014	1,206	1,213
	189,325	247,287	249,243	242,166

There were 421 applications for this service and of these, 245 were implemented. The remainder either had relatives living nearby or considered that the charge for the service was too high. Many of this latter group in any case were helped to make private arrangements for domestic work.

New cases in 1967 were referred from the following sources:

	1966	1967
Direct application Health and Welfare Department General practitioners District nurses General Hospital Ministry of Social Security Others	169 119 109 16 27	147 144 64 11 35 7
	460	421

During the year, the Supervisor and her staff made 6,159 domiciliary visits in connection with assessment and allocation, compared with 5,593 visits in 1966.

There was an average of almost 255 persons requiring daily help from the home help service throughout the year.

10 cases with considerable accumulations of dirt, etc., received help, amounting to 186 hours. Home conditions were such as to require special cleansing efforts to make them habitable and this was done by 2 home helps at a time. An additional payment of up to 10/-d. per week is made to home helps engaged in this work.

During 1967, 23 applications were received by the department and of these, 11 were given home help assistance.

In July, 1967, there was a temporary withdrawal of service by the home helps. This action was taken without the support of the Union and was due to a misunderstanding. After full and frank discussions with Union representatives and the co-operation of all concerned, the difficulties were resolved and the service resumed after 24 hours.

This, the first full year of operation employing new principles introduced in 1966 which were fully

described in the Report for that year has shown a considerable saving (approximately 20%) in the total number of hours allocated.

MENTAL HEALTH SERVICES

The excellent co-operation between Dr. N. Kelly, Consultant Psychiatrist, and the staff of the department continued and I would like to thank Dr. Kelly for his help and co-operation during 1967.

This has been a year of changes in the mental health services. In November, 1967, the mental welfare and general welfare services were amalgamated to form a social work section under a Chief Social Work Officer, who was directly responsible to the Medical Officer of Health, as it was considered that this would result in a better and more comprehensive system of community care.

Nightingale House, the hostel for mentally ill patients, with accommodation for 16 residents, continued to be used primarily as a half-way house for patients on discharge from hospital. During the year 32 patients were admitted to the hostel and 32 were discharged, 22 of whom were able to return to their own homes or to lodgings and at the end of the year there were 9 patients in residence.

The Nightingale Club for the mentally ill and for patients with a past history of mental illness continued to thrive. This club meets in Nightingale House but is managed by the members themselves.

Care and After Care.

Table M.1 gives details by age and category of the referrals to the Mental Welfare Section during the year. A total of 301 cases were referred, 68 less than in the previous year. The mental welfare officers made 8,091 home visits and conducted 327 office interviews. Arrangements were made for 94 psychiatric outpatients and 73 domiciliary appointments and for the admission of 142 patients to hospital (Table M.4) and 20 patients to temporary care. The number of persons under care at home at the end of 1967 was 451, a decrease of 105 on the corresponding

figure for 1966 (Table M. 3)

Attempted Suicide.

Table M.5 records persons brought to the notice of the mental welfare officers as having attempted suicide. The pattern follows that of previous years, in that the commonest method adopted was the taking of tablets. The total of 41 compares with the figure of 47 for 1966

Mental Subnormality.

During the year, 23 cases were referred to the department as compared with 36 cases in 1966. Of these, 22 were placed under care and 1 admitted to hospital. Dr. J. S. V. Mouat, Medical Superintendent of the Prudhoe and Monkton Hospital, continued to hold a monthly clinic for the examination of subnormal patients in South Shields and by the end of the year had seen a total of 68 patients.

The number of subnormal patients in hospital at the end of the year was 150, compared with 153 in 1966.

Training Centres.

The number on the register at the end of the year was 113 (Table M.7) and there was a short waiting list for admission to the Junior and Adult Female Centres.

The extensions referred to in my 1966 Report were completed and brought into use on 4th September, 1967. An official opening ceremony was performed on 17th November, 1967, by Mr. A. Blenkinsop, M.P.

TABLE M. 1.

MENTAL HEALTH ACT 1959

Number of Patients Referred to Local Health Authority During Year Ended 31st December, 1967.

ormal Grand Total	p 4	(18) (19)	- 51	4 102	,23	3 12	13	100	11 301
Total Subnormal	subnormal Under 16 a	(17)	4	-		. 6		-	12
Subriormal	16 and over	(12) (19)	ě		8	8			ı
Serarely Submormal	Under Age 16 M F	(13) (14)	ĝ	3	8	ۍ س			رد ع
rmai	16 and over	(11) (12)	8	2 2	8	1 2		3 1	6 5
Submormal	Under Age 16 M	(6) (10)		g garanti	od		g e	•	2 2
Psycopathic	16 and over	(2) (8)							8
Psyco	Under Age 15 M F	(2) (6)	8	8		٠	and the second second second		
Mentally IIII	16 and over M F	(3) (4)	20 31	51 46	5 16		9 1	37 58	120 157
Mente	Under Age 16 M F	(1) (2)	ê	9	-		•		
Referred by		(a) General Practitioner	(b) Hospital, on discharge from in-patient treatment	(c) Hospital after or during out-patient or day treatment	(d) Local Education Authority	(e) Police and Courts	(f) Other sources	Total	

TABLE M. 2.

APPOINTMENTS WITH CONSULTANT PSYCHIATRIST

(a) Psychiatric Out-patients Clinic

	Und M	er 16 F	Ove	F 16	Total
Subnormal Mentally Ill		17			70 24
	Openions	Company	-	-committees	405900000
	26	17	24	27	94

(b) Psychiatric Domiciliary Appointments

	Unde M	r 16	Qve M	r 16	Total
Subnormal	can can		28	1 44	1 72
		4000000 40000000	28	45	73

TABLE M. 3.

CARE IN THE COMMUNITY

Number of Patients at 31st December, 1967

Subnormal Severely Subnormal Totals Grand F M F M F M F M F M F M F M F M F M F	
Mentally Ill Under 16 Over 16 M F M F	71 147
tally 16	p=d
Men Under M	grand
	Patient under Domiciliary care at 31st December, 1967

TABLE M. 4.

ADMISSIONS TO HOSPITAL

Hospital admissions arranged by the Mental Welfare Officer for all categories of mental disorder.

Total		108	10	22	142
Other Hospital	[Zi	good			
Oth	×			٠ .	2
Prudhoe and Monkton	[II4		4 (-
Prudhe Mon	Σ	2	8 6		2
Cherry Knowle Hospital, Ryhope	Œ	24	0 [[-	41
Cherry Hospita	Σ	2	-1 [-		25
ospital	ia,	25	=1 p==1	O'MACIA	27
General Hospi South Shield	×		3 m		43
		Informal (Emergencv)	bservation	reatment)	
		S verific	530		
		Admission Section 2	Section	Section	

TABLE M. 5.

							4		
IPT	ing F	\$	1	8	\$	1	1	1	8
ATTEM	Drown M	·	8	8	1	í	23	,	2
E OF	Vrists F		ŧ			:	1	ı	2
NATUR	Cut V	8	posts	ł		1	8		
SEX AND	sons (Liquid) Poisons (Coal Gas) Cut Wrists Drowning M F M F M F	1	1	8	ı	b	1	1	þ
BY AGE,	Poisons (8	8	8	1	othe	8	green (1
TEAR 1967	(Liquid) F	8	1	1	8	1	1	8	8
R THE	Poisons	\$	ę	1		8	a	6	2
S FO	A STATE OF THE PERSON NAMED IN	1	\$	1	1	1	8	8	1
CIDE	Hanging M F	6	l .	ß	1	ı	1	1	
ATTEMPTED SUICIDES FOR THE YEAR 1967 BY AGE, SEX AND NATURE OF ATTEMPT	of Tablets F	g	pool	က	2	good	က		16
ATTE	Overdoses	3	4	*	ന	w	2		19
	Age in Years	0 - 12	13 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 and over	

MENTALLY SUBNORMAL PATIENTS IN HOSPITAL AT 31st DECEMBER, 1967

TABLE M.6.

Hospital	Ma	Males .	Females	les	Total
	Under 16	16 and over	Under 16	16 and over	
Prudhoe & Monkton Hospital	20	49	Land Land	42	122
General Hospital South Shields		28	8	8	28
Other Hospitals	è	8		1	1
Total	20	2.2		42	150

TRAINING CENTRES, 10 OAKLEIGH GARDENS, CLEADON, NR. SUNDERLAND TABLE M. 7.

		Subn	normal	* 10 14.00	Severely		Subnormal	mal		To	Totals	A STATE OF THE STA	
	Under	91	Over	16	Under	16	Over 16	91	Under	91	16 Over	97	Grand
	2	ĬI.	Z	[I		Ĺz.	Z	يترا	M	لحرا	M	لتر	3
												on making g	
Attending Training Centre	w	-	3	00	28	67	22	11	33	26	35	19	=13
Awaiting entry		1	9	3		2	· ·	Second .		2	8	4	7

CO-ORDINATION AND CO-OPERATION WITH THE HOSPITAL AND FAMILY DOCTOR SERVICES

South Shields Health and Welfare Department continued its policy of trying to foster better relationships among the 3 branches of the National Health Service and a short summary of the ways in which this is being done is given bereunder:

Co-operation with the hospitals.

In the mental health field, a monthly session is held at the Stanhope Parade Clinic for mentally subnormal persons of all ages, this clinic was attended by Dr. J.S. V. Mouat, Medical Superintendent at Prudhoe and Monkton Hospital and the Senior Mental Welfare Officer. The intention is to follow up all mentally subnormal persons in the borough, so that the hospital service has prior knowledge of patients who may require temporary or long term hospital care. In addition to this clinic, monthly case conferences on mental illness are held which are attended by Dr. N. Kelly, Consultant Psychiatrist, mental welfare officers and the Matron of the psychiatric hostel.

Mr. R.D. Jowett, Consultant Ear, Nose and Throat Surgeon, holds a monthly clinic at Stanhope Parade and the local authority audiometrician is in attendance. Children coming to this clinic are mostly school children but preschool children also attend.

The Health and Welfare Department, in conjunction with the Regional Hospital Board, started part-time geriatric day centres at Boldon Lane Clinic in 1964 and at Wenlock Lodge Community Centre in September, 1966. These centres are intended to provide social care and medical supervision for old people discharged from hospital and are staffed jointly by local authority and hospital staff. The sessions are held on one day each week and there are also facilities available for physiotherapy, occupational therapy and chiropody.

The Medical Officer of Health and Superintendent

Health Visitor lecture to student nurses at the hospital, whilst student nurses spend some time observing the local authority nursing services and paying observation visits to the day nurseries, child health centres and junior training centre.

Since March, 1967, the Principal Dental Officer, has attended clinical sessions at the Dental Hospital, Newcastle and has found this of great benefit in keeping abreast of the latest developments and techniques.

There is an interchange between local authority and hospital medical staff; a local authority medical officer attends the special care and premature baby unit at the General Hospital once a week and a hospital medical officer takes a weekly child health clinic at Boldon Lane Clinic.

The Superintendent Health Visitor and the Senior Welfare Officer attend the Consultant Geriatric Physician on a ward round once a fortnight at South Shields General Hospital. The social problems of the patients are discussed and the value of this in co-ordinating the services for the elderly is considerable.

The health visitor is a valuable link between hospital and home and whilst she is able to supply useful information on social and environmental conditions to the hospital staff, she can also pay follow up visits to the patients after discharge from hospital. Health visitors on rota attend ward rounds on the children's ward and the premature baby clinic at South Shields General Hospital.

One health visitor, who is jointly employed by Durham County Council, Sunderland and South Shields County Boroughs, acts as social worker and contact tracer for the special treatment clinics at Sunderland Royal Infirmary and Stanhope Parade, South Shields, under the direction of the Consultant Venereologist, Colonel B. Levy.

The Stanhope Parade Clinic is used by the Hospital Service to house the Chest Clinic. Out-patient facilities are available under the direction of a Consultant Chest

Physician.

All close contacts of notified cases of tuberculosis are followed up by health visitors. The health visiting

staff also make visits to the patients' homes and give advice and guidance on any medical or social problems which may occur.

One of the local authority domiciliary midwives is allocated to the special care and premature baby unit and follows up the babies discharged from this unit.

As mentioned in my report last year, arrangements are in hand to supply micro-filmed copies of the records of all children immunised against tetanus to the casualty department at the Ingham Infirmary, South Shields.

Co-operation with General Practitioners.

The Medical Officer of Health is a member of the Local Medical Committee and of the executive committee of the local division of the B.M.A., whilst representatives of the Local Medical Committee and of the local division of the B.M.A. are co-opted members of the Health Services Committee. The Medical Officer of Health is also a member of the Regional Liaison Committee, composed of officers of the Newcastle Regional Hospital Board and Medical Officers of Health of Local Health Authorities in the region.

For some years, there has been a policy of coordination between health visitors and general practitioners, six health visitors being allocated to six practices. This is not a full-time attachment; the health visitors visit the surgeries regularly and act as liaison officer between the doctor and other members of the health visiting staff.

In one group practice, a health visitor gives health education talks to all expectant mothers attending an ante-natal clinic at the surgery.

The pilot scheme for the attachment of midwives to general practitioners, which commenced in September, 1966, was expanded in 1967. Eighteen general practitioners from eigh practices are now participating in the scheme, accounting for approximately 40% of the total number of family doctors working in the Borough. Five practices made use of local authority premises and three practices worked from their own surgeries.

The Home Nursing Service, because of the nature of its work, is in daily contact with both hospital and general practitioner services and has excellent cooperation with both.

The Maternity Liaison Committee forms a link between all three branches of the service in the midwifery field and has been useful in providing an opportunity for discussing difficulties encountered and ways of ensuring co-ordination and co-operation among the three branches.

Admissions to Danesfield Maternity Home, which is a general practitioner unit, are on social grounds. The investigations are carried out by the health visiting staff. The Medical Officer of Health or his deputy attends the monthly meeting at the hospital. When these cases are considered, representatives from the Hospital Managment Committee and the general practitioners are also present.

It is hoped that in the future, health centres will be built in the Borough so that the services of general practitioners and the local health authority will be even more fully integrated. Discussions on the possible siting of the centres and requirements of the various bodies concerned were initiated towards the end of 1966, in conjunction with medical representatives from the Ministry of Health.

Part III

INFECTIOUS DISEASE

Notification and Deaths.

Epidemiology.

Notes on Certain Infectious Diseases.

Hospital Admissions.

Laboratory Examinations.

Tuberculosis.

Venereal Disease.

Confirmed Cases and Registered Deaths of Notifiable Infectious Disease, 1967

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	5 and over	Deaths							E405300							· ·	· ·	Monote	erimpa		4
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Seasonal Incidence of Notifications, 1967

						P							
Disease	Jan.	Feb.	War.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Scarlet Fever	H	57	Ę,	r	genat	grand	knod				8		ري ا
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Influenzal			ĸ	9	II.	ŧ	4	· ·	3	9	2	1	1
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spiratory	7		*7	Y)	C	C	n	5h =	7)	N F	7 -	v	243
Non-respiratory	-	\$	4		77	ľ	1	ਈ ਵੀ	à	-4	~	q	5 \
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Comparative Notifications for the Past Ten Years

TABLE C.

	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Scarlet Fever. Whooping Cough. Acute Poliomyelitis. Measles Uiphtheria. Influenzal. Smallbox. Smallbox. Typhoid Fever. Food Poisoning. Poerperal Pyrexia. Ophthalmia Neonatorum. Malaria. Tuberculosis: respiratory. Tuberculosis: respiratory. Tuberculosis: respiratory.	0	45 00 825 45 10 10 65 1 65 1 65 1 65 1 65 1 65 1 65	82 100 H800 H 10 H 10 H 10 H 10 H 10 H 10	8.00 17 801 14:400 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	20 14 0 00 11 100 10 4 10 1 1 10 10 10 10 10 10 10 10 10 10 10	20 20 20 20 20 20 20 20 20 20 20 20 20 2	441161 1870 1 1 1 1 1 4 0 4 4 1 1 1 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	120 121 138 127 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	136 1 126 1 1 26 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3 1 1 2 6 3	C81101 1-21-1101411-1 60
Total combined incidence	682	3350	849	2434	829	2529	1427	1426	1738	381

NOTES ON CERTAIN INFECTIOUS DISEASES

Scarlet Fever.

Confirmed notifications numbered 15, compared with 39 cases in 1966. The cases were evenly spread over the year.

Whooping Cough.

The number of accepted cases was 8, this is the lowest number of notifications to the department for a number of years.

Measles.

The number of accepted cases was 236 as compared with 1,363 in 1966. The cases were mainly in the first and last quarters of the year. No adult cases were reported and the majority of children affected were between 3 and 9 years of age.

Smallpox.

There were no cases of smallpox reported in 1967.

Enteric Fever.

There were no cases of enteric fever notified in 1967.

Poliomyelitis.

For the sixth year in succession, there was no case of poliomyelitis notified to the department.

Diphtheria.

No case of diphtheria was notified for the sixteenth successive year. Undoubtedly the absence of diphtheria in the community proves the efficacy of immunisation. It is always a matter of concern that this might lead to

complacency and a consequent reduction in the demand for immunisation. This could have serious results as there is always the possibility of diphtheria recurring.

Acute Encephalitis.

One case was notified during the year. This child was admitted to hospital and recovery was uneventful.

Food Poisoning.

A total of 7 cases of "food poisoning" were notified. Of these, 4 were confirmed. The cases were all in the same district but any connection between them was not traced.

Dysentery.

A total of 119 cases were reported and investigated during the year and 15 of these were confirmed bacteriologically. Of these, 4 were under the age of five and are accounted for by a small outbreak in the day nursery. Admissions to the day nursery were temporarily suspended.

Hospital Treatment.

During 1967, 6 cases of notifiable infectious disease from South Shields were treated in hospitals as follows:

2 3
5
•

Laboratory Examinations.

The following is a list of pathological examinations carried out for the Health and Welfare Department in the Public Health Laboratory, Newcastle:

Faeces..... 666
Urine..... 3
669

TUBERCULOSIS

The number of notifications for tuberculosis was 52, compared with 68 in 1966.

Incidence of Tuberculosis.

Cases notified during 1967	52
Non-notified fatal cases	.39
Notified posthumously	100
Cases re-admitted	3
Inward transfers	1
	4000 COMMISSION COMPOSITOR
	56

Cases Removed from Register.

Death from tuberculosis or other cause Left the town or untraced Five years free (respiratory) Wrong diagnosis or notifications withdrawn	. 14
	~Office charges
	61
	WARRACTORN.

Number of cases on register at end of 1967 - 298.

Notifications:

During 1967, there were 52 cases notified as follows:

	Males	Females	Total
Respiratory Non-Respiratory	25 3	18	43

- Age Group	Respi	ratory	Non-Res	piratory
0	Male	Female	Male	Female
Under 1 year	-	1 2 3	0 0 0	1
20 -24 years	3 2 3 10 1 3	1 3 4 2 1		1 2 1 1 1 -
TOTALS	25	18	3	6

The notifications rate was 0.47 per 1,000 of the population - 0.39 respiratory and 0.08 non-respiratory.

The number of cases of tuberculosis notified or ascertained during each of the past ten years is as follows:

	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Notified: Respiratory Non-Respirator Not Notified: Respiratory Non-Respirator	y 8 1		100 15	78 9	95 11 4	103 9 3	80 5	55 8	59 9	43 9
Total	156	149	115	87	110	115	85	63	68	52
Notification Rate	1.44	1.37	1.06	0.79	0.97	1.02	0.78	0.58	0.63	0.47

A comparison of the notification rates for the neighbouring authorities is as follows:

	Respiratory	Non-Respiratory
South Shields C.B	0.39 0.51 0.80 0.37 0.42 0.30 0.21	0.08 0.15 0.08 0.09 0.04 0.03 0.03

Mortality.

Respiratory tuberculosis caused 7 deaths during 1967. There were no non-respiratory deaths recorded.

This represents a death rate of 0.04 per 1,000 of the population, compared with 0.06 for 1966. 1966

The death rate for South Shields from tuberculosis during the past ten years was as follows:

	THE REAL PROPERTY.					NO MERCHANISM CO.			(L. L. E. Z.	THE STREET SHAPE IN
Control de	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
	0 7	0 00	0.00	0 00	0.75	0 00	0 07	0 77	0.00	0 04
Respiratory	0.10	0.09	0.00	0.09	0.15	0.02	0.07	0.11	0.00	0.04
Non-Hespiratory	0.10	0.03	0.00	0.01	0.01	0.01	0.01	0.01	0.00	0.00

The following table shows the death rates of neighbouring authorities, from all forms of tuberculosis:

	Respiratory	Non-Respiratory
South Shields C.B	0.04 0.089 0.06 0.04 0.04 0.06 0.02	0.00 0.019 0.00 0.01 0.00 0.006 0.002

Mass Radiography.

The mass radiography arrangements as set out in my report of last year remained the same. A total of 6,242 South Shields patients were x-rayed by the Regional Hospital Board's mobile unit, of whom 17 were found to have tuberculosis and 24 to have carcinoma. The patients examined fell into the following groups:

Doctors'	patie	ents		2,162
Contacts.				- 216
			children.	
General p	public			3,717

Rehousing on Medical Grounds.

The family of patients with tuberculosis whose home

conditions are such as to interfere with the proper treatment and control of infection may be given priority rehousing. During 1967 such allocations were made whilst many other families were recommended for extra points to give them some measure of priority.

TUBERCULIN TESTING OF SCHOOL ENTRANTS

Routine tuberculin testing of school entrants by means of the Heaf Test was continued during the year. A total of 1,374 children were tested; 1,165 were negative and 175 had a positive reaction. Of the positive reactors, 147 had previously been given B.C.G. and the number of natural conversions was, therefore 28. This gives an incidence of positive reactions as 2.4% All 28 positive reactors were referred to the Chest Clinic for further investigation. No cases of tuberculosis were notified from this group.

B.C.G. VACCINATION

Details of the programmes are as follows:-

No. of children offered tuberculin testing and	
B.C.G. vaccination	1,720
No. of consents received	1,434
Percentage of consents	83.37%
No. who had previously had B.C.G	107
No. tuberculin tested	1,373
No. found to be positive (excluding those already	20 00
vaccinated with B. C. Gl	13.2%
No. vaccinated with B.C.G	1,067
No. x-rayed by mass x-ray	147
No. requiring further investigation after mass x-ray	3
No. found to be tuberculous	a

All positive reactors were followed up by a health visitor or school nurse and full details of all positive reactors were notified to the family doctor.

Of the 3 children referred for further investigation,

VENEREAL DISEASES

The Venereal Diseases Clinic continues to be held at Stanhope Parade and I am indebted to Colonel B. Levy, Physician in Charge, for the following report:

"I have the honour to submit the following Annual Report for the Special Clinic of South Shields.

It is disappointing to find for the second year running there has been an increase of work in the Department but it is reassuring to know that people requiring treatment or advice are reported promptly.

The total registrations of new patients increased from 424 to 518. This is the highest number recorded in any one year since 1952. There was also an increase of total attendances from 1,830 to 1,989.

Gonorrhoea.

In 1967, 26 more cases were seen, making a total of 110 for the year. There were slightly more infections in teenagers, viz one girl under 16 years, 5 girls between 16 and 17 years, and 15 (7 males, 8 females) aged 18 and 19 years of age.

Syphilitic Infection in the early stages remains uncommon and only one patient suffering from this condition was seen. There were, however, 12 patients found suffering from late complications - a number slightly less than the previous year.

175 seamen received treatment and investigation.
This represents an increase of 40 over the number seen in 1966. Of these 116 were from the United Kingdom.

During the year four babies were referred for serological investigation and 24 problem sera were sent for examination.

It is hoped that financial provision will be made in 1968 for the appointment of a G.P. Clinical Assistant for part-time sessional work.

The report includes a summary of the work undertaken by the part-time health visitor to the clinic. In conclusion, I wish to acknowledge the valuable help provided by the laboratory services of South Shields General Hospital, Sunderland Royal Infirmary and the Public Health Laboratory, Newcastle General Hospital.

The following table shows in detail new cases dealt with at the South Shields Clinic for the first time during each of the past ten years.

	1958		1960				1964			
Syphilis Gonorrhoea Others	14 82 232	13 54 193	8 64 195	19 127 245	15 119 354	17 108 347	9 71 329	12 43 300	13 84 327	12 110 396
	0 20 0		263				409	355	424	518

TOTAL ATTENDANCES

Year	Total	Male	Female
1958 1959 1960 1961 1962 1963 1964 1965 1966	3,288 2,713 2,323 2,458 3,175 2,948 2,165 1,736 1,830 1,989	1,788 1,313 1,331 1,561 2,081 2,024 1,849 1,288 1,306 1,347	1,500 1,400 992 897 1,094 924 766 488 524 642

South Shields cases under treatment at other centres

	New Cases	Total Attendances
Newcastle	34	146
Sunderland	16	34

The following is a summary of the work of the health visitor during the year:

	Effective	Ineffective	Total
Syphilis Gonerahoea Non V.D. Contacts	3 13 11	10 24 1 5	13 37 2 16
	28	40	68

Visits to Contacts.

16 visits were made to 9 contacts who were named by patients attending the clinic and being treated for Gonorrhoea. Of these 9 contacts - 8 were found to have Gonorrhoes and received treatment, the remaining one was not traced.

Part IV

ENVIRONMENTAL HYGIENE

Report of the Chief Public Health Inspector.

Water Supply, etc.

Housing.

Food and Drugs Control.

Atmospheric Pollution.

Provision of Factories Acts.

Rodent and Pest Control.

The Annual Report of the Chief Public Health Inspector Mr. R. V. Robinson D. M. A., M. R. S. H., M. A. P. H. I.

Water Supply.

An adequate and constant supply of chlorinated water is provided by the Sunderland and South Shields Water Company and chemical and bacteriological reports show the water to be wholesome.

All the houses in the town have a piped supply though a few still remain in scheduled clearance areas which are served only by a standpipe in the yard.

Chemical Quality.

Four samples have been taken during the year for full analysis and the following is a typical result expressed in parts per million.

Alkalinity (CaOO ₃)	19.1
Chlorides (Cl)	16.0
Ammoniacal Nitrogen	0.122
Albuminoid Nitrogen	0.048
Nitrite as Nitrogen	Nil
Nitrate as Nitrogen	1.0
Oxygen Absorbed (3 hrs. at 37°C)	0.53
Temporary Hardness	19.1
Permanent Hardness	41.4
Total Hardness	60.5
Total Solids (dried at 180°C)	96.0
Calcium (Ca)	21.5
Magnesium (Mg))	1.7
Iron (Fe)	0.07
Manganese (Mn)	Nil
Carbonate (CO ₃)	11.5
Sulphate (SO ₄)	29.3
Silica (SiO ₂)	3.5
Residual Chlorine	0.075
Colour (Hazen)Less	than 5
Turbidity	Nil
ph	8.95

Two complaints were received of rust in the mains supply but flushing of the affected mains by the Water Company resolved the problem.

Four complaints were also received about rust in hot water systems and it is interesting to note that the Water Company have now recommended that indirect systems of water heating should be used wherever possible and that the use of galvanised pipes and fittings and 'duplex' or hot pressed brass fittings, should be avoided in direct systems. Advice was also given on the use of proprietory polyphosphates in direct systems.

Lead in Water Supply.

An investigation was made into the lead content of drinking water in old houses with lead pipes and particularly of the water which had been standing in the pipes overnight.

The W.H.O. International Standard for Drinking Water is now 0.05 mg/litre but the maximum limit after 16 hours contact with lead pipe was taken to be 0.3 mg/litre.

Thirty one samples were taken in all, 19 of these being 'overnight' samples from seven houses. The results of the first 'overnight' samples from each house all exceeded 0.05 mg/litre; one result of 0.4 mg/litre exceeded the limit for 16 hours contact. Two further samples were taken from six of the houses with Water Company taking independent samples at the same time. The previous results could not be repeated however all 12 results falling well within the limit of 0.3 mg/litre and only two (at 0.08 and 0.10) exceeding the standard of 0.05 mg/litre. These results were almost identical with those obtained by the Water Co. for their independent sample.

Fluoride Content.

Until about 1955 the sources of the town's water supply comprised mainly deep wells and the natural fluoride content was about 1.0 part per million. In more recent years other sources have been brought into use and this has resulted in a reduction of the fluoride content. All

water supplied now comes from the Derwent Reservoir and during 1967 the fluoride content remained steady at 0.5 parts per million. This is the same level as in the latter part of 1966.

Following agreement by the three Health Authorities within the area served by the Water Company proposals were made by the Company for increasing the fluoride content to th optimum figure of 1.0 part per million, but certain technical considerations have delayed the implementation.

Bacteriological Quality.

Ninety nine samples of water were taken for bacteriological examination from houses in different parts of the
town and four were reported to contain small quantities of
coliform organisms. Three of these were from the same area
that had rust in the main and further samples taken after
flushing the main were satisfactory. The unsatisfactory
result from the fourth tap could not be repeated.

The Water Company also reported taking 129 samples from consumers taps all of which proved satisfactory.

Drainage & Sewage Disposal.

The Tyneside Joint Sewerage Board was established in 1966 and comprises 20 constituent districts including South Shields which is represented by 2 members. A scheme has been approved in principle for sewage purification for the whole area to be undertaken by the Board at one point on the North bank of the river but for the time being a combined system of sewerage is used in the Borough with soil and surface water together discharging into the River Tyne and the sea.

Swimming Baths.

There is one public swimming bath in the Borough and 6 school pools.

In order to ensure the maintenance of satisfactory water quality the chlorin residual, pH and alkalinity of the pool water is checked regularly and samples are taken

for bacteriological examination. Ninety three visits and inspections were made and 183 samples of water examined all of which proved to be satisfactory.

Pet Animals Act, 1951.

Five licences were granted for the year for premises and market stalls to be used for the sale of pets. Six visits were made to these premises and one minor contravention remedied after verbal notice to the occupier.

Rag, Flock and Other Filling Materials Act, 1957.

One firm in the Borough is registered for the use of specified filling materials in bedding and upholstery. The business was well conducted throughout the year and one sampling of filling material which was tested proved satisfactory.

Fertilisers & Feeding Stuffs Act, 1926.

Seven samples of fertilisers were taken informally and three were reported unsatisfactory. One of these, a sample of nitrate of potash was misnamed. Although the ingredients present were found to be in the amounts stated in the statutory declaration 20% of sodium was also present and the product should properly have been designated "potassio nitrate of soda" or "Chilean potash nitrate". The vendor was advised and cautioned and discontinued the sale of the product.

Samples of John Innes Base and Growmore fertiliser taken from the same premises both contained phosphoric acid in amounts exceeding, by more than the permitted variation, those specified in the statutory declaration. The business subsequently changed hands and the sale of fertilisers discontinued so that it was not possible to follow up with the taking of formal samples.

Pharmacy & Poisons Act, 1933.

There are 25 premises included in the local Authority's list as being premises from which part II poisons are sold.

All the premises have been visited once in the year and two minor contraventions were remedied following advice to the occupiers.

THE OFFICES, SHOPS & RAILWAY PREMISES ACT, 1963

Registered premises, inspections & visits.

During the year 67 new registrations were received, being principally in respect of newly occupied premises, businesses taken over by new employers and in a diminishing number of cases where the employers had to be reminded of the need to register their premises. 66 premises were removed from the register generally because of cessation of business or reduction in working hours, resulting in a net increase of 1 over last year. Consequently at the end of the year 1,160 premises in which 7,282 were employed were registered with the local authority.

A total of 766 visits of all kinds were made under the Act, being made up of inspections of premises, checking compliance with notices served, advising on remedial measures involving structural alterations and obtaining further information regarding accident notifications. 70 interviews were given to affected persons, and 117 letters were sent out. 373 inspections of premises were carried out resulting in 277 notices being served on owners and occupiers specifying 2,484 Contraventions of the provisions of the Act.

The policy of 'vetting' all plans submitted to the local authority was adhered to, as the value of this has been amply proved in previous years. Whilst such plans are, of course, submitted only for approval under the Building Hegulations and Town Planning Act as appropriate, the persons tendering these plans are usually appreciative of information regarding any likely contraventions of the Offices, Shops and Railway Premises Act.

Staff losses have again militated against our reaching reaching the target we had set, and during the latter part of the year only one inspector was regularly engaged

on this work and then for only some 50% of his time. However, the years work shows a steady progress, the number of contraventions checked and found to be remedied on request being 1,106, which is more than twice the previous years total. A few premises remain in need of an inspection but these are relatively small premises in the main and no great difficulty is anticipated in completing these.

Contraventions.

Routine inspections of premises brought to light 2,449 contraventions of the Act and regarding which the occupiers of the premises received notices to remedy. Of this total 203 were also reported to the owners of the premises as being matters for which they may have had some responsibility. In a considerable number of instances however, the owners appear to have indemnified themselves by including suitable clauses or conditions in the terms of tenancy.

Contraventions found to have been remedied as a result of notification by the local authority were 1,106 which resulted in 87 notices being complied with in respect of 74 premises. This is a significant increase on the previous year, and is following a pattern which was to be expected.

On average this year almost 9 contraventions were found per premises inspected. It is to be assumed that once these matters have been complied with and the premises are basically satisfactory then the rate of inspection can be accelerated.

Of the 2,484 contraventions found, the one which occurred most frequently related to 'repair and construction of floors, stairs and passages' there being 319 instances found. This was followed, numerically, by inadequate cleanliness of workrooms of which 305 instances were found. Inadequate ventilation of workrooms accounted for 192 of the contraventions and lack of, or inadequate handrails to staircases were found in 133 instances. Obstructions of floor areas, passages and the like were found in 61 cases and 33 unguarded openings were in need of fencing. Additional

watercloset facilities were required in 15 cases and in 61 premises extra washbasins were needed. There were 34 instances where hot water was needed to the washing facilities. One hundred and six abstracts of the Act were required, 81 first aid boxes were below standard and 67 thermometers had to be provided. These latter are a reduction on previous year and supports a point of view which has been expressed on more than one occasion that whilst these items ca readily be provided to comply with the Act, matters which could involve alterations and greater expenditure were being left until advice was given on the subject following an inspection. The requirements of the Act are considered by some business people to be rather difficult to interpret and such people are inclined to do any necessary work only when suitable remedies have been described to them by the visiting inspector.

Machinery was found to be inadequately fenced in 76 cases. 27 of these involved prescribed dangerous machines and 57 were in food premises.

In 2 instances, the opinion of the Deputy Superintending Inspector of Factories was requested regarding the suspected inadequacy of guarding of machinery. The machines in question were (a) an electrically operated kitchen waste disposal unit in which the disintegrating mechanism could be reached quite readily whilst in operation and (b) a portable electrically operated jigsaw, where the blade above the soleplate was not fenced. The Ministry are at the present time taking these matters up with the manufacturers concerned.

Only 16 instances of overcrowding were found and in only 22 cases was the maintenance of a suitable temperature found to be lacking.

Accidents.

During the year 59 accidents were notified, of this number 5 were forwarded to other local authorities, 2 were sent to H.M. Factories Inspectorate and 6 did not require to be notified. The remaining 46 accidents were classified as shown in table 'A'. Of this total, 20 cases involved falls of persons. The 5 falls on fixed stairs were all checked and in no case was it found that the stairs were

at fault. 13 visits were made to determine the circumstances of reported accidents, where additional information was required, or where it was felt that some useful advice could be given on preventing a recurrence.

None of the accidents could be described as 'sensational' nor did any result in serious injuries but it does seem that with a little more foresight or attention to detail a good number of the incidents need never have happened.

This is instanced by Accident No. 10 where instead of using the available steps provided, the manager of a grocery shop preferred to use a convenient chair to reach some stock on high shelving. Unfortunately the inset plywood seat of the chair collapsed under the combined weight of himself and his load and he fell, breaking his right arm.

Accident No. 37 resulted in a young shop employee losing the fleshy tip of one finger when a hinged trapdoor fell down as he was descending through a floor access into a basement stockroom. On inspection it was found that a heavy duty line had been laid over the wooden floor and this interfered with the proper opening of the hinged edge of the trapdoor. As a result the trapdoor, when open, came to rest just past the vertical plane so that the slightest pressure sent the door down under its own weight. A simple cabin hook could have prevented this accident, but was only fitted when suggested to the occupier after the accident had occurred.

Accident No. 5 involved a female assistant in a greengrocery shop who strained her back whilst lifting a bag of potatoes. The potatoes were supplied to the shop in 56 lb. bags and in determining whether this was a reasonable weight to expect a female person to handle, reference was made to the most appropriate legislation under the Factories Acts, concerning the lifting of heavy weights. As a result it was considered that 56 lbs was not an unreasonable weight in this case.

The only accident during the year involving machinery (No. 11) concerned a hand operated baling press. While being used the ratchet mechanism failed, resulting in the metal extension handle striking the operator on the head.

Analysis of reported accidents by type of injury.

	Boys	Men	Girls	Women	Total
Scalds	.1	**	9	-	1
Broken bones		3	•	6	9
Sprains & strains	-	3	4	4	11
Bruising	1	2	2	7	12
Cuts	2	1	-	9	12
Others	-	-	-	1	1
	4	9	6	27	46

Analysis of reported accidents by cause.

	Boys	Men	Girls	Women	Total
Struck by falling object	-	1	•	4	5
Machinery (non-powered)	1	-	-	6	1
Falls-one level to another	-	2	-	1	3
Falls on stairs	1	1	2	1	5
Stepping on or striking object	1	2	-	5	8
Falls from steps & ladders	-	•	-	1	1
Falls on same level	=	T	3	8	11
Handling goods	•	3	1	5	9
Not otherwise specified	1	-	-	2	3
	4	9	6	27	46

Analysis of reported accidents by type of premises.

	Boys	Men	Girls	Women	Total
Office	-	-	1	•	1
Retail shop	3	3	5	15	26
Wholesale dept & warehouse	-	3	-	•	3
Catering Establishment	1	3	-	12	16
Canteen	-	-	-	-	CD CD
Fuel storage	-	•	-	w.	60
	4	9	6	27	46

Factories.

1. Inspections for purposes of provisions as to health.

	No. on	Number of				
Premises	Register	Inspections	Written Notices	Occupiers Prosecuted		
1. Factories in which sections 1,2,3,4, & 6 are to be enforced by local authorities	21		Œ			
Factories not included in (1) where section 7 is enforced by Local Authority	305	64	17			
Other premises in which section 7 is enforced by local authorities	29	19	da,	C 2		
	355	83	17			

2. Cases in which defects were found

	Number	r of case	s in which re found heier:	defects	No of
Particulars	Found	Remedied	to H.M.		utions
Want of Cleanliness (S.1)	etr.	45	.co	469	
Overcrowding (S.2)			40	12	
Unreasonable Temp. (S.3)				gra-	
Inadequate Ventil- ation (S.4)					TO THE RESIDENCE OF THE PROPERTY OF THE PROPER
Ineffective Drain- age of Floor (S.6)				•	-
Sanitary Con- veniences (S.7)					
(a) Insufficient	1	5	•	•	-
(b) Unsuitable or defective	60	52		4	8
(c) Not separate for Sexes					
Other offences against the Act (not including offences relating to outworkers	•		a,		
Total	61	52		Ą	

Outworkers.

Two outworkers were notified during the year. Both were concerned with alterations to clothing and premises and conditions were found to be satisfactory.

Food and Drugs Control.

Food and drugs legislation is aimed at ensuring wholesomeness and quality of the products bought and consumed by the public. Throughout the whole range of production, manufacture, distribution and retailing, legislative provisions impose requirements on staff and personnel. There are also extensive provisions relating to composition, the use of additives, preserving and labelling of foods.

Control is exercised by the inspection of food premises, stalls, and delivery vehicles and foodstuffs and by the sampling of food and drugs for chemical and bacteriological examination.

The following new statutory instruments were published during the year.

The Meat Pie and Sausage Roll Regulations, 1967.

The Canned Meat Products Regulations, 1967.

The Sausage and Other Meat Products Regulations, 1967.

The Artificial Sweeteners in Food Regulations, 1967

The Solvents in Food Regulations 1967.

The Food (Control of Irradiation) Regulations, 1967

The Carcinogenic Substances Regulations, 1967

The Labelling of Food Regulations 1967

The Coffee and Coffee Product Regulations 1967

The Ice Cream Regulations 1967

The Margarine Regulations 1967

Sampling for Chesical Analysis

A total of 108 samples were taken including one taken formally. This is very much below the desirable level of sampling owing to the critical shortage of staff during the year. The formal sample (of pork sausage) was reported unsatisfactory having a meat content of only 48.8% against

a recommended level of 65% which was subsequently to be a statutory requirement under the provisions of the Sausage and Other Meat Products Regulations 1967. Because these Regulations do not come into operation until 1969 the Council decided that a letter of caution and advice would be appropriate.

Pesticide Residues in Foods.

Twenty five samples of food were taken for examination for pesticide residues. I sample of lettuce was reported to contain an insignificant amount of benzene hexachloride and I of sprouts was reported to contain 0.030 parts per million of D.D.T; the significant level for D.D.T. in sprouts is considered to be 0.050 parts per million.

Food Hygiene.

On 1st January, 1967, The Food Hygiene (Markets, Stalls, and Delivery Vehicles) Regulations 1966 came into operation and extended to markets, stalls and delivery vehicles food hygiene requirements of a standard similar to those previously applying to premises.

The frequent inspection of premises, stalls and vehicles used for the manufacture, distribution or sale of food is necessary if satisfactory control of food hygiene is to be maintained. These visits are linked with attempts to advise and educate, where necessary, the food handlers present. In the past year 330 inspections were made of premises as against a desirable number of about 4,000. Contraventions of the regulations numbering 147 were found in 28 premises.

It is estimated that there are 145 stalls (including market stalls, mobile shops, ice cream and similar vehicles) and 400 food delivery vehicles operating within the Borough. 44 inspections were carried out, mainly of mobile shops and 138 contraventions were found in 25 stalls or vehicles.

Legal proceedings were instituted under the Food Hygiene (General) Regulations in respect of 9 premises and under the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations in respect of four 'stalls'. The details are as follows:

Type of premises or 'stall'	Summary of Conditions	Results of proceedings
Baker/Retail Shop	Lack of Cleanliness of premises & equipment. Failure to provide adequate facilities for the maintenance of personal cleanliness. Failure to provide first aid equipment. Failure to provide accommodation for outdoor clothing. Failure to maintain premises in satisfactory structural condition.	Fine of £15.0.0d. imposed plus £5.5.0d. costs.
General Dealer	Lack of cleanliness of premises and equipment Failure to provide adequate facilities for the maintenance of personal cleanliness. Failure to provide first aid equipment. Failure to maintain premises in satisfactory structural condition.	Fine of £20.0.0d. imposed plus £3.3.0 costs.
General Dealer	Lack of cleanliness of of premises. Failure to protect food from risk of contamination. Failure to display 'Now wash your hands' notice.	Fine of £45.0.0d. imposed plus £5.5.0d.costs.
General Desler	Insanitary Premises Lack of cleanliness of equipment. Failure to protect food from risk of contamin- ation. Failure to maintain premises in satisfactory structural condition.	Fine of £80.0.0d. imposed. No costs awarded.
Food Warehouse	Insanitary premises. Failure to maintain premises in satisfactory structural condition.	Fine of £16.0.0d. imposed plus £7.7.0d. costs.

On the Control of the		
Type of premises or 'stall'	Summary of Conditions	Results of proceedings
Restaurant	Insanitary premises Lack of cleanliness of premises & equipment. Failure to provide first aid equipment, Failure to provide adequate facilities Failure to maintain premises and equipment in satisfactory structural condition. Failure to protect food from risk of contamination.	Fine of £50.0.0d. imposed plus £5.5.0d. costs
Retail	Lack of cleanliness of premises & equipment. Failure to provide first aid equipment. Failure to provide adequate facilities for the maintenance of personal cleanliness.	Fine of £80.0.0d. imposed plus £10.10.0d. costs
General Dealer	Lack of cleanliness of premises & equipment. Failure to maintain premises in a satisfactory structural condition.	Fine of £45.0.0d. imposed - no costs awarded.
Restaurant	Insanitary premises Lack of cleanliness of premises & equipment Failure to protect food from risk of contamination. Failure to maintain premises & equipment in satisfactory structural condition.	Fine of £100 imposed and prohibition of use of premises for 6 months. Costs of £15.15.0d awarded.
Mobile General Dealer	Failure to maintain vehicle in satisfactory condition Failure to protect food from risk of contaimination. Failure to wear clean over clothing. Failure to provide adequate facilities for the maintenance of personal cleanliness. Failure to provide first aid equipment. Failure to provide facilities for the cleansing of the vehicle and equipment.	Fine of £81.0.0d. imposed.

Type of premises or 'stall'	Summary of Conditions	Results of proceedings
Mobile Ice cream Dealer	Failure to maintain vehicle in satisfactory condition. Failure to provide adequate facilities for the maintenance of personal cleanliness Lack of cleanliness of vehicle and equipment Failure to provide/wear clean overclothing Failure to provide first aid equipment Failure to provide facilities for the cleansing of vehicle and equipment.	Fine of £70.0.0d. imposed plus £10.10.0d. costs
Mobile Ice cream Dealer	Failure to maintain vehicle in satisfactory condition. Lack of cleanliness of vehicle & equipment. Failure to provide/wear clean overclothing. Failure to provide adequate facilities for the maintenance of personal cleanliness Failure to provide first aid equipment.	Fine of £50.0.0d. imposed
Mobile Ice cream Dealer	Failure to maintain vehicle in satisfactory condition. Failure to provide adequate facilities for the maintenance of personal cleanliness. Failure to provide adequate facilities, for the cleansing of vehicle and equipment.	Fine of £25.0.0d. imposed plus £5.5.0d. costs

Complaints.

Complaints about the quality or fitness of food purchase are frequently received from private individuals and the frequency has increased in recent years. This may be due to a growing awareness and wish for better standards by the public, perhaps stimulated by the publicity given to food hygiene cases heard in the courts; or perhaps to the increase in pre-packing or the diminishing personal contact between shopper and shopkeeper with the growth of self service units. Or it may of course indicate that there is more frequent and growing cause for complaint.

Whatever the reason it is desirable that complaint

should be made when justified and every encouragement is given. This enables investigations to be made which serve not only the public health interest but also that of the industry and traders concerned.

In the past year 84 complaints were received, 14 of them in relation to imported foods (mostly canned meat) and 14 of them about mould (mostly bread and meat pies).

The majority of complainants express the wish not to be involved in legal proceedings but merely hope to ensure that by bringing the complaint to the attention of the Department the causative factors may be found and remedied. This wish is always respected and the complaint is dealt with as informally and with as little trouble to the complainant as possible. Sometimes, inevitably, investigation of the complaint leads to more formal action in respect of conditions found but the complainant is not involved in that aspect of the matter. Much more often however, investigation shows the need for advice or the need to remedy some previously unsuspected fault in the system.

Legal proceedings were taken in respect of one of the complaints this year when a £20 fine was imposed for the sale of insect infested chocolate.

Classification of Premises

Classification	Totals	Fitted to Comply Reg. 16.	Reg. 19 Applicable	Fitted to Comply Reg. 19.
Butchers	98	98	98	98
Bakers & Confectioners.	46	46	. 46	46
Fish Fryers	37	37	37	37
Fishmongers	17	17	17	17
Grocers general dealers.	324	323	318	316
Greengrocers	:61	61	57	57
Bakehouses	38	38	38	38
Catering Establishments	102	102	102	102
Public houses & clubs.	129	129	129	129
Food Stores/warehouses:	25	25	23	23
Ice Cream manufacturers	7	7	7	7
Miscellaneous	186	185	149	149

Premises Registered under Section 16, Food & Drugs Act, 1955:

- (a) For the manufacture, storage or sale of ice cream 347

Bacteriological Investigation of Food.

Ice Cream.

The following table shows the results for the total of 69 samples taken:

Provisional Grade		Percentage of Total	Remarks
1 2 3 4	46 5 12 6	67 7.2 17.2 8.6	Good Satisfactory Unsatisfactory Very Unsatisfactory

Other Foods.

One hundred and eighteen samples of various foods have be submitted for bacteriological investigation; these included a meats and other prepared and ready to eat foods.

Thirty samples were considered tobbe unsatisfactory or of doubtful quality. In these cases further investigations were made and advice on preparation, storage and handling given where appropriate.

Milk Distribution.

Milk is sold from or at 299 premises in the town; the licence holders sell heat treated milk from 4 different sources and untreated milk from 12 different sources.

The following table shows the number of licences in force for the various special designations.

CAUSES OF DEATH by Age and Sex 1967 (as supplied by the Registrar-General)

TABLE 2

	j	Total		4 weeks	€ ₹ - \ - \		A.	Age in	Vears	22		r troducti	75 and
mear to senso	Š	All Ages	2T		1-	5-	15-	25-	35-	45-	55-	65-	over
Inherculosis, Respiratory		2	•				•	1	6	3	9-6	-	8
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3. Syphilitic Disease	COL.	(And	8		1)	1	•	1	\$	ŧ	~	B
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9 Other Infective and Parasitic Diseases	1 36 E; -	parel.		0)	1		1	-4	1	ę	4	•
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	[24	36	1		8	9	1		ô	1	ນາ	9	เก
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3 Malignant Neoplasm, Uterus		91	ŝ	•	1	8		prod	grand	4	su.	⋖*	grant
•					and the same								
4 Other Malignant and Lymphatic Neoplasms.		ης) Q/	Ş	\$ 	1	f	9	•	2	9	22		23
	Saller State of the Saller	7	9	1	•	.6	1	derect.	~	ස	Ø\	Q/ C/	83
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TABLE 2 - continued

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Disposal of Unfit Food.

Condemned meat is collected under contract for processing by heat treatment but before leaving the abattoir it is throughly stained with a green dye. All other condemned food is destroyed by incineration under an arrangement with the Cleansing Superintendent.

The total weight of meat and offal rejected at the abattoir was 12 tons 10 cwts. 74 lbs

Other foods inspected and condemned amounted to 10 tons 9 cwts 4 lbs made up as follows:

Canned meats	and meat	products	7,259 lbs.

Vegetables c	anned		10,085
		frozen foods	
Other canned	and bott	led foods	5,614

The number of condemnation certificates issued in respect of these goods was 1,636

HOUSING

Slum Clearance.

The following area was represented during the year and compulsory purchase orders subsequently made which included additional houses in the 'grey' land i.e. additional land required for satisfactory development. It is interesting to note that in this area overcrowding was found to exist in 22 dwellings - i.e. 7.46%.

				THE RESERVE AND PROPERTY.
Area	Date	Dwellings	Families	Persons
High Shields No. 8		295	290	759
C.P.O. grey lands additional dwellings	100	2	2	5

Compulsory purchase orders containing the following clearance areas were confirmed.

Area	Date confirmed	4	Date represented
Hedley StreetBowman StreetEastbourne Grove No. 1	17.1.67	11.10.66	10.11.65
	24.4.67	15. 2.67	6. 4.66
	20.2.67	None	12. 7.66

Individual Unfit Houses.

In addition to the dwellings included in clearance areas a further 12 dwellings and one part of a dwelling were represented individually as being suitable only for demolition or closure.

As a result of this action 12 closing orders were made and one undertaking was accepted in lieu of a closing order.

Eleven families were affected comprising a total of 36 persons.

Overcrowding.

In addition to the degree of overcrowding which was noted during the year to exist in slum clearance areas, i.e. 7.45%; a further 7 complaints of overcrowding were investigated in other parts of the town.

Five of these were confirmed and where necessary the Housing Department was informed to ensure the allocation of the extra points.

Rent Act, 1957 - Provisions Relating to Disrepair.

The following are details of applications considered during the year. Total applications dealt with since the Act came into operation are also shown.

1967	1957-1967 inc.
Applications for Certificates of Disrepair 2 Applications refused or withdrawn	639 45
Undertakings accepted by Council	595 455 127
Applications for cancellation:	54

	1967	1957-1967 inc.
(b) Granted after objection by tenant (c) Refused	1	6
Applications for Certificates relating to compliance with undertakings:		
(a) from landlords	5	136 73

Improvement Grants.

Details of the number of grants applications dealt with in the year as follows:-

Discretionary Grants.

Total number received	73	
Number received and approved in respect of owner/occupied houses	34	
Number received and approved in respect of tenanted houses	36	
Number refused	1	
Number withdrawn or not proceeded with Average grant awarded per dwelling	£322. 0.	3d.

Standard Grants.

Total number received	31		
Number received in respect of Owner/occupier	s 20		
Number received in respect of tenants			
Average grant awarded per dwelling £	122.	14.	10d.

The reason for refusal of the discretionary grant was that the house concerned would not have the necessary minimum life.

Seamen's Lodging Houses.

There are no Common Lodging Houses in the Borough but 10 premises are licensed as Seamen's Lodging Houses providing accommodation for seamen. 1 licence was relinquished during the year and 1 change of keeper occurred.

The total accommodation now available in these premises is sufficient for 100 men but nowadays there are usually only a very small number of lodgers in residence.

All the premises have been inspected a number of times during the year the total number of visits being 34. Owing to the continual falling away of demand for this kind of accommodation contraventions were few and of a minor nature.

ATMOSPHERIC POLLUTION

Domestic Smoke Control

The first smoke control order made in accordance with the Councils 15 year programme came into effect on 1st October. The necessary works of conversion had been completed without undue difficulty and a settled pattern of administration had evolved for the approval of proposals and completed work. All possible assistance was given to the few householders who found difficulty in adapting themselves to the operation of new appliances.

The No. 2 Smoke Control Order was made by the Council and confirmed by the Minister of Housing and Local Government during the year and should come into effect on 1st October, 1968. This covers an area bounded on the north by Dean Road, on the east by Sunderland Road and King George Road and on the west by Mortimer Road. It covers an area of approximately 77 acres and includes 1,213 premises of which 1,162 are dwelling houses.

Industrial.

It was not found necessary to take formal action in respect of any industrial emissions during the year but four contraventions were dealt with informally and there was no subsequent occurrence from any of the premises concerned. In one instance the informal action led to the renewal of existing boiler plant and equipment.

One application was received and granted for the prior approval of a new furnace and plans for two new chimneys were approved, in one case after modification.

Control of Rodents and Other Pests.

Notifications of rodent infestation were received in respect of 487 premises and a further 23 were found in the course of surveys under the provisions of the Prevention of Damage by Pests Act, 1949. There were 135 infestations by rats and 375 by mice; 367 of the infested premises were dwelling houses.

All the infestations were dealt with by the Council's pest control staff in a total of 2,881 visits.

The Borough's sewerage systems were treated twice during the year, 618 manholes were baited and 105 takes were recorded.

Infestations of insects and other pests dealt with numbered 215. Complaints received cover a considerable variety of pests but the majority concern cockroaches: 19 were flea infestations and only three were bed bugs.

SUMMARY OF PUBLIC HEALTH INSPECTORS' WORK, 1967.

Complaints received	. 1,326
(a) Inspections and Investigations:	
Houses: Inspected. Under Public Health Acts	. 264
Houses Re-inspected: Under Public Health or Housing Acts Improvement Grants Certificates of disrepair Houses in multiple occupation Seamen's lodging Houses Verminous or dirty premises Other nuisances	. 116 7 . 49 . 34
Drainage:- Visits Works supervised Tests applied	. 3
Infectious Diseases:- Cases investigated	337

Overcrowding:- Houses inspected on complaint No. of above found to be overcrowded	7 5
No. of overcrowded houses in clearance areas represented	22
Power Non-Power Building and engineering works. Outworkers premises. Offices, Shops, workplaces. Offensive trades. Places of public entertainment. Pet shops Rag flock and other filling materials premises. Samples taken. Barbers and hairdressers. Fertilisers and Feeding Stuffs. Samples taken. Swimming baths. Samples taken - bacteriological Pharmacy & poisons. Food Premises and stalls and vehicles. Inspection of unsound food.	61 23 766 12 36 21 18 93 183 25 374 142
Food and Drugs Samples Taken:	1,636
Milk Chemical	18 259 109
Ice Cream Chemical Bacteriological	5 69
Water supply Chemical Bacteriological	35 99
Other Food & Drugs Chemical	85 118 25
Atmospheric Pollution:- Inspections of industrial fuel burning appliances. Smoke observations - half hour Smoke observations - casual	13 23 40 2,725
Pest Control:- Rodent infestations cleared Other pests infestations cleared Visits of inspections	510 215 2,881
(b) Notices Served:	
Public Health and Housing Act:- Intimation notices	324 80 47 17

Pı	evention of Damage by Pests Act	65 4 4
01	ffices, Shops and Railway Premises Act	277
(c)	Repair and improvements to houses:	
	Floors relaid or repaired	32 67 92 77 46 18 6 82 120
	abated	108

OFFICES, SHOPS AND RAILWAY PREMISES ACT,

Contraventions found and remedied.

Sec.	Contraventions	Found	Remedied
5	Cleanliness Overcrowding Temperature:	305 16	102
	(a) Means of heating	8 67 22 192	7 65 5 94
	Lighting: (a) Adequacy	120 115	49 42
9	Sanitary Conveniences: (a) Cleanliness. (b) Ventilation. (c) Lighting (adequacy). (Maintenance).	87 91 24 35	27 28 19 28
10	(d) Adequacy	15 48 63 12	9 18 23 8
	Washing facilities: (a) Ventilation	30 4 11 61 34 32 37 27	12 2 4 20 18 12 21
	Accommodation for Clothing (a) hanging	27 77	10 9 49
14	(b) drying	2 23 31	13 7
TO SERVICE STATE OF THE PROPERTY OF THE PROPER	Floors, Passages and Stairs: (a) Unfenced openings	33 133 319 61	5 30 110 35
17	Fencing of exposed parts of machinery Prescribed Dangerous Machinery (a) Food Equipment	21 4 2	27 2 3
	Non-Prescribed dangerous machinery (a) Food Equipment	36 13	25 - 3

Sec. No.	Defects	Found	Remedied
19 23 24 49	Cleaning of Machinery	4 - 81	77 77 65 11
	Total	2,484	1,106

Part V

SERVICES UNDER THE NATIONAL ASSISTANCE AND RELATED ACTS

Residential Accommodation.

National Assistance Act, 1948, Section 47.

National Assistance (Amendment) Act, 1951.

Domiciliary Services for Elderly Persons.

Welfare of Blind Persons.

Welfare of Handicapped Persons.

Part VI

MISCELLANEOUS SERVICES

Medical Examinations.

Re-organisation of the Welfare Services

A significant event in 1967 was an objective study of the social work services of the whole department with the assistance of the Organisation and Methods Officer. Mr. Hedley, Assistant Director of Welfare Services was due to retire in February, 1968, and it was decided to review the structure of the department prior to the appointment of his successor.

It was felt that the social workers, whether engaged on mental welfare or general welfare, had an identical basic training and being a homogeneous group, it was unnecessary to continue the division between the two branches of the social work sections of the department especially as these divisions were often illdefined. It was also considered that a complete fusion would result in saving in manpower and a better service to the community. Consultations were held with officers of the Regional Office of the Ministry of Health and after very careful thought, the following establishment was agreed:

- 1 Chief Social Work Officer
- 2 Senior Social Workers 6 Social Workers
- 6 Welfare Assistants
- 2 Home Teachers for the Blind.

The combined staff of the welfare services and the mental welfare service was:

- 1 Assistant Director of Welfare Services
- 1 Senior Mental Welfare Officer 1 Senior Welfare Officer 5 Mental Welfare Officers

- 4 Welfare Officers
- 6 Welfare Assistants
- 3 Home Teachers for the Blind.

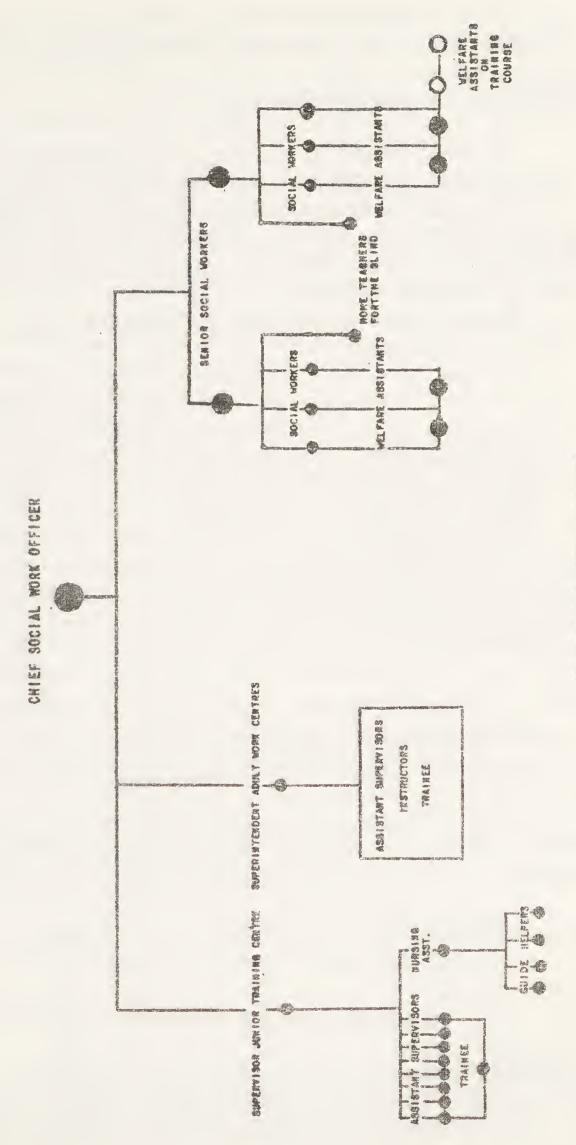
The proposals also included an item to co-ordinate the functions of the social work staff with those of health visitors and the promotion of consultation between the two services at field worker level is emphasized.

The appointment of a Chief Social Work Officer was, in my view, a step forward in rationalising all resources necessary to provide an efficient structure so vital in the "community care" services. This officer would be directly responsible to me for all social work activities in the department, viz. general welfare, the physically handicapped; blind welfare, mental welfare and the adult training centres. Mr. Hedley was appointed to the post of Chief Social Work Officer in November and I am indebted to him for his assistance in establishing the new organisation.

It was also agreed that we should appoint a Supervisor of Accommodation. This officer to be responsible for the domestic activities of the whole department, such duties to include the physical comfort of residents in the welfare homes, general supervision of the home help service, the meals on wheels service and all domestic staffs, particular emphasis being placed on catering and diets for the elderly. Miss D. Barker, who is suitably qualified and experienced, was appointed to take up her duties early in 1968.

It is anticipated that early in 1968 the new handicapped work centre in Woodbine Street will be completed. This is a most progressive venture and it was decided to appoint a Superintendent of Adult Work Centres, who would be responsible for the co-ordination of craft and social functions relating to this centre and the activities at the adult mental health training centre. This officer is to be directly responsible to the Chief Social Work Officer.

As an appendix to my report, I have set out a chart which gives details of the new structure:



HEALTH AND WELFARE DEPARTMENT SOCIAL SERVICES STRUCTURE

The following is an account of the work of the Welfare Services during the year ended 31st December, 1967:

Residential Accommodation.

The total number of places provided in residential accommodation was 270. Owing to the present economic situation, the Ministry of Health have not been able to accept our proposal for a new residential home in the Woodbine Street area which is intended to replace one or more of the smaller homes.

The residential accommodation provided at the end of 1967 was as follows:

	No. of Places
St. Thomas' House	15 17 22 39 17 18 17 17 17 17 19 30 42
	WHICH THE RESERVE TO

During the year, a total of 91 patients were admitted to residential accommodation 41 male, 50 female). At the end of 1967, the average age of residents was male 77 years, female 78 years, as compared with 77 years and 80 years respectively for 1966. Further details are as follows:

Age Groups	Male	Female
Under 65 65 - 70 71 - 75 76 - 80 81 - 85 86 - 90 91 - 95 96 - 100	8 13 20 24 21 15 3	9 13 15 19 42 30 9
	104	138

During the year, an increasing number of elderly persons were admitted to the homes for short periods. This enabled their relatives to enjoy a holiday free from worries. This invaluable service is limited to the number of vacancies in the homes but it is a service which we hope to expand.

Exchange holidays with residents in the care of three other authorities (Durham County Council, Cumberland County Council and Darlington County Borough Council) were arranged on a "knock for knock" bases, in other words, at no extra cost to the authorities concerned apart from a pooling of the transport requirements.

The care of the elderly residents in the homes presents considerable difficulty since an increasing proportion of them require more intensive care than is normally expected to be provided in such accommodation. This situation inevitably arises, owing to the high level of chronic illness both physical and mental in those of advanced age and, consequently, a constant and close liaison with the hospital and general practitioner services is essential. I am glad to say that co-operation with local hospitals and family doctors has always been very satisfactory and I am particularly indebted to Dr. N.A. Nicholls and Dr. N. Strang of the General Hospital for their valuable help and understanding in this field. Case conferences are held at regular intervals, in order that agreement can be reached on the appropriate action to be taken to meet individual requirements.

National Assistance Act, 1948 - Section 47 and National Assistance (Amendement) Act, 1951.

I have to report that it was again not found necessary use the provision of the Acts during the year.

Domiciliary Services for the Elderly.

The policy of the Authority in encouraging elderly persons to live independently in their own homes, or with relatives, was continued. A register is kept in the

department, in which is recorded the ascertainment of an individual's needs and the number of aged persons on this register at the end of the year was 6,859. This register is invaluable to the various sections of the domiciliary services as a source of reference and close co-operation is maintained with the Ministry of Social Security, who have continued to issue a pre-paid postcard from this Authority to every person reaching pensionable age. The Social work staff made a total of 6,082 visits to elderly persons in their own homes.

Meals Services.

Three vehicles are used to provide a meals on wheels service. One is manned by W.R.V.S. personnel and the other 2 by the department's staff. The total number of meals provided and delivered during 1967 was 38,575. This number shows an increase of 313 on the previous year.

Mid-day meals were also provided to elderly persons able to attend a residential home in their locality. Details of the number of meals provided at the various homes are as follows:

	1966	1967
Wenlock Lodge	3,915 3,213 2,062 1,057 1,520 987 669	4,522 3,264 2,251 777 2,182 1,009 1,236 437
	13,423	15,678

This shows an increase of 2,255 meals provided, compared with the previous year

Luncheon Clubs.

The popularity of the luncheon clubs continued unabated during 1967 as in addition to the meal they provide an opportunity for members with interests in common to meet. During the year, three further clubs were

opened at Romilly Street Baptist Church Hall, Whiteleas Methodist Church Hall and Brownsea Hall, Imeary Street. At the end of 1967, 10 clubs were operating and the Committee will continue to expand this worthwhile service as necessary.

The total number of meals provided by this Service during 1967 was 14,055 compared with 8,402 in 1966.

Elderly Work Centres.

This Centre continued to operate at 16 Barrington Street and approximately 16 - 20 pensioners attended the Centre regularly. They are able to make goods for sale and out work for local firms and factories. Although this enables them to earn small sums, the main purpose of the Centre is to keep the elderly persons fit and active and a means of meeting as a group.

This Centre will be transferred to the new handicapped work centre on its completion in 1968.

Warning Lights.

At the end of 1967, 80 self contained battery warning lights were in use in elderly persons homes throughout the town.

Warden Scheme.

In October, 1967 a pilot scheme for a warden service in the Lonnen Area of the town was introduced with the intention that the warden should exercise a friendly oversight of approximately 61 elderly persons in their own homes and when necessary contact the various agencies concerned. If this scheme proves successful it will be expanded to the remainder of this area and to other areas of the town.

Holidays.

During 1967, 48 elderly persons enjoyed a holiday at Blackpool which is popular for this type of holiday. In addition a number of elderly persons spent a holiday in a

caravan in the Lake District (further details, see page 112

WELFARE OF BLIND PERSONS

Incidence of Blindness.

No. certified as blind	67 54 3 10 69
Treatment (medical, surgical or optical) of these persons registered as blind in 1967:	
(i) Where no treatment recommended -	
No. of cataract cases	7 7 7
(ii) Where treatment recommended but inadvisable -	
No. of cataract cases	2
(iii) Where treatment recommended -	
No. of cateract cases	9 6 22
(iv) Where treatment has been received (on follow-up action) -	
No. of cataract cases	5

The total number of registered blind persons as at 31st December, 1967, was 369, details of which are as follows:

PRESTURE INTERNATIONAL CO.		O THE PROPERTY AND PROPERTY ASSESSMENT ASSES		A STATE OF THE PARTY OF THE PAR
	(Years)	Males	Females	Total
0 -	4	City		
15 -	16	CN-	1	-
111 -	15	1200	1	1
16 -	20	-	1	1
121 -	29	2	2	4
130 -	39	3	2	5
40 -	49	10	14	24
111 - 116 - 121 - 130 - 40 -	15 20 29 39 49	2 3 10	2 2 14	1 1 4 5 24

ige (Years)	Males	Females	Total	
50 - 59 60 - 64 65 - 69 70 - 79 80 - 84 85 - 89 90 & over	26 20 21 39 16 4	22 14 26 76 35 25 9	48 34 47 115 51 29 10	
	142	227	369	

Over 65% registered blind persons are aged 65 or over and 54% are 70 years of age and over compared with 66% and 54% respectively for 1966.

Treatment.

Follow-up of registered blind persons -

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(i) No. of cases registered during 1967 in respect of Section F1 which Para. 7(c) of Form B.D.8 recommends:	d			
(a) No treatment	7	1		7
(b) Treatment (medical, surgical or optical)	9	6	a managaman and a managaman an	22
(c) Treatment inadvisable	2	-	-	9
(ii) No. of cases at (i) (b) above which on follow-up have received treatment	5		SECURITY CONTRACT CON	regional editorial Actacladades (1997) and general

Close liaison is maintained with the South Shields Institute for the Blind and 10 members of the Welfare Committee serve on the Management Committee of the Institute. The Institute is supported by a yearly per capita grant from the local authority, the amount this year being £356.

In addition, the South Shields Society for the Blind supplies free of charge to blind and partially-sighted persons aids and special items recommended by the home teachers.

Wireless and Talking Books.

All blind persons can obtain a free wireless receiving licence and wireless sets are available from the British Wireless for the Blind Fund or the Rediffusion service is granted at a concessionary rate. The present yearly charge for the use of a Talking Book Machine is £3, £2 of which is met by the local authority.

Handicraft Classes.

Classes are held weekly at the Institute for the Blind, I Wood Terrace, under the supervision of the home teacher and an average of 21 blind persons attend regularly. The department's sepcial coach conveys them to and from the Institute.

Welfare of Deaf Persons.

The welfare of deaf persons is undertaken by the Northumberland and Durham Mission to the Deaf and Dumb on an agency basis. Their missioner lives in the town and the Department works in close co-operation with him to ensure that all deaf persons can receive whatever services are required.

Hard of Hearing.

The South Shields Hard of Hearing Fellowship is a well organised group and recognising this, the Authority makes an annual grant to assist them in their activities. The Club is affiliated to the North Eastern League of the Hard of Hearing and meets regularly.

WELFARE OF HANDICAPPED PERSONS

The register of all physically handicapped persons (other than the blind and deaf) desirous of taking the advantage of the many services available to them is maintained by the department. The maintenance of the register is a statutory requirement and thenumber of disabled people on the register at the end of 1967 was 462. As far as possible, the registered disabled are visited by officers of the department who are always willing to give advice and mobilse available servies.

Adaptations and Personal Aids.

The planning of structural alterations in the homes of disabled persons to meet individual needs and the provision of personal aids has been an important part of the scheme of welfare services. The basic purpose of this is to assist independence and mobility and welfare officers visit the homes of disabled persons and make recommendations to meet individual needs. During 1967, adaptations were carried out at the homes of 8 handicapped persons, at a total cost of £371.

Handicraft Centre.

Handicraft services for the physically handicapped are held in the Prince Edward Road Youth Centre on 6 sessions each week. An average of 26 disabled persons attend each session and instruction is given by 2 members of the department's welfare staff. Transport to and from these sessions is provided for those cases needing it. A wide variety of handicraft work is done and periodic sales of work are held. It is fully anticipated that when the new Centre at Woodbine Street opens, this service will expand.

In addition, the department's staff visit a number of of handicapped persons in their own homes to give tuition in handicrafts and to provide these patients with some remunerative employment.

Holidays.

Holidays are provided for disabled persons each year and places are allocated to those considered to be in greatest need. A group of 40 disabled persons had a one week holiday at Blackpool.

In addition, a holiday caravan presented to the Welfare Committee by the Rotary Club of South Shields in 1963, is stiuated at Keswick and is equipped with special fittings for handicapped persons. It is available on the recommendation of welfare officers to disabled people for periods not exceeding two weeks. This has proved very popular and each year the caravan is fully booked from May to September, with odd bookings during the rest of the year.

Car Badges for Disabled Persons.

Identification badges are available for issue to all disabled drivers, whose handicap results in restricted mobility and the Borough Police exercise every courtesy and discretion in allowing parking as near as possible to the disabled driver's destination.

MEDICAL EXAMINATION FOR THE PURPOSE OF SUPERANNUATION AND SICK PAY SCHEMES

The following table shows the number of medical examinations carried out during 1967 by the medical staff of the Health and Welfare Department:

Categories	1966		1967	
0,100,501,103	Male	Female	Male	Femal
For other departments within the local authority	228		200 1	
Total	252	210	310	236

Shortage of medical staff made it increasingly difficult to ensure that these medical examinations were carried out with as little delay as possible and in November, 1967, a medical questionnaire was introduced with full agreement of the trade unions concerned which made examinations unnecessary in the majority of cases.

